

Local Form 19

September 2021

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF NORTH CAROLINA
CHARLOTTE DIVISION**

IN RE:)	
)	
Aetius Restaurant Holdings, LLC)	Case No.: 23-30474
)	Chapter 11
)	
)	
Debtor(s))	
_____)	

COVER SHEET FOR AMENDED SCHEDULES AND STATEMENTS

Briefly describe the amendments to the Debtor's schedules and statements below, including the names of the schedules and/or statements being amended and any creditors added or removed.

Note: A filing fee may be required.

1. Schedule A/B:
 - a. Fifth Third Checking Account #5557 was removed.
 - b. Truist Bank Payroll Account #6804 was removed.
 - c. Truist Bank Marketing Account #6766 was removed.
2. Schedule E/F:
 - a. William Parish Plumbing was added as a creditor.
 - b. U.S. Small Business Administration was added as a creditor.
 - c. Nateara Glover was added as a creditor.
 - d. The address for BMI - Broadcast Music Inc was updated.
 - e. Address for Integration Network LLC was updated.
 - f. Address for Internal Revenue Service was updated and moved from Schedule F to Schedule E.
 - g. Address for Jacob Bornman was updated.
 - h. Address for Meridian Waste was updated.
 - i. Address for Micah Bacon was updated.
 - j. Address for Michael T. Amburgey – ExpReimb was updated.
 - k. Address for MomentFeed UB Inc. was updated.
 - l. Address Multi Unit Analytics, LLC was updated.
 - m. Address for Summit Consulting LLC was updated.
 - n. Address for United Healthcare was updated.
 - o. Address for Solid Entertainment Group LLC was updated.
 - p. Address for Greater Columbia Chamber of Commerce was updated.
 - q. Address for Alarm, Fire & Security LLC was updated.
 - r. Address for Greater Charlotte Refrigeration was updated.
 - s. Address for Southern Realty Development Corporation was updated.
 - t. Address for Ken Hutchins was updated.
 - u. Typographical error fixed on Richland County Taxes.

3. Statement of Financial Affairs: The response to Question 7 was updated with the Nateara Glover lawsuit.

Date: October 30, 2023

/s/ Robert A. Cox, Jr.

Attorney for Debtor(s)

Robert A. Cox, Jr. (Bar No. 21998)

Matthew A. Winer (Bar No. 56222)

525 North Tryon Street, Suite 1400

Charlotte, North Carolina 28202

Telephone: (704) 344-1117

Facsimile: (704) 344-1483

rcox@lawhssm.com

mwiner@lawhssm.com

Attorneys for Debtors and

Debtors-in-Possession

Pro Se Joint Debtor (if applicable)

Fill in this information to identify the case:

Debtor name Aetius Restaurant Holdings, LLC

United States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINA

Case number (if known) 23-30474

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☒ Other document that requires a declaration **Statement of Financial Affairs**

I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 30, 2023

X /s/ Mark Cote

Signature of individual signing on behalf of debtor

Mark Cote

Printed name

CEO

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Aetius Restaurant Holdings, LLC

United States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINA

Case number (if known) 23-30474

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**
Copy line 88 from *Schedule A/B*..... \$ 0.00

1b. **Total personal property:**
Copy line 91A from *Schedule A/B*..... \$ 658,306.17

1c. **Total of all property:**
Copy line 92 from *Schedule A/B*..... \$ 658,306.17

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)
Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 12,500,000.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**
Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 1,516,783.90

3b. **Total amount of claims of nonpriority amount of unsecured claims:**
Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 7,661,932.03

4. **Total liabilities**
Lines 2 + 3a + 3b \$ 21,678,715.93

Fill in this information to identify the case:

Debtor name Aetius Restaurant Holdings, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINACase number (if known) 23-30474
☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: **Cash and cash equivalents**

1. Does the debtor have any cash or cash equivalents?

☐ No. Go to Part 2.

☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Fifth Third BankOperating Account5243\$0.003.2. HomeTrust BankACH9836\$0.003.3. HomeTrust BankAP9855Unknown3.4. HomeTrust BankFranchise9756\$0.003.5. HomeTrust BankGift Cards9831\$0.003.6. HomeTrust BankMain Checking9751\$12,193.00

Debtor **Aetius Restaurant Holdings, LLC**
Name

Case number (If known) **23-30474**

3.7. **HomeTrust Bank** **Marketing** **4469** **\$0.00**

3.8. **HomeTrust Bank** **Non-Pooling** **9817** **Unknown**

3.9. **HomeTrust Bank** **Payroll** **9812** **Unknown**

3.10
3. **HomeTrust Bank** **Credit Card Receipts** **9799** **\$0.00**

4. **Other cash equivalents (Identify all)**

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$12,193.00

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: **87,745.00** - **0.00** = **\$87,745.00**
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$87,745.00

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

Debtor **Aetius Restaurant Holdings, LLC**
Name

Case number (If known) **23-30474**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Office Furniture (see attached)	\$0.00		\$75,063.17

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. Collectibles *Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles*

43.	Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$75,063.17
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44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment) Equipment (see attached)	\$0.00		\$483,305.00

Debtor **Aetius Restaurant Holdings, LLC**
Name

Case number (If known) **23-30474**

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$483,305.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No

☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No

☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

☒ No. Go to Part 10.

☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

☒ No. Go to Part 11.

☐ Yes Fill in the information below.

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.

☐ Yes Fill in the information below.

Debtor **Aetius Restaurant Holdings, LLC**
Name

Case number (If known) **23-30474**

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$12,193.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$87,745.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$75,063.17	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$483,305.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$658,306.17	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$658,306.17

Wild Wing Café Support Center Office Inventory
6100 Fairview Ave Suite 1156
Charlotte, NC 28217

	Description	Quantity	New Purchase Cost	Total	Current 50% Value
	Office Desk	7	\$ 1,781.63	\$ 12,471.41	\$ 1,897.25
	Office Desk Book Case	5	\$ 758.90	\$ 3,794.50	\$ 1,897.25
	Desk Chairs	7	\$ 175.23	\$ 1,226.61	\$ 613.31
	Office Chairs	10	\$ 125.44	\$ 1,254.40	\$ 627.20
	Office side Tables	2	\$ 255.63	\$ 511.26	\$ 255.63
	Book Cases	2	\$ 751.00	\$ 1,502.00	\$ 751.00
	Wood File Cabinets	3	\$ 351.16	\$ 1,053.48	\$ 526.74
	Metal File Cabinets	1	\$ 655.23	\$ 655.23	\$ 327.62
	Computers	8	\$ 815.66	\$ 6,525.28	\$ 3,262.64
	Computers	1	\$ 1,212.45	\$ 1,212.45	\$ 606.23
	Desk Monitors	7	\$ 117.22	\$ 820.54	\$ 410.27
	Office desk Printers	3	\$ 175.89	\$ 527.67	\$ 263.84
	Office TV's	2	\$ 350.00	\$ 700.00	\$ 350.00
	Xerox Office Color Printer	1	\$ 35,117.00	\$ 35,117.00	\$ 17,558.50
	Xerox B&W printer	1	\$ 2,519.33	\$ 2,519.33	\$ 1,259.67
	Break room Table & Chairs	1	\$ 450.81	\$ 450.81	\$ 225.41
	Conference room Table	1	\$ 2,533.61	\$ 2,533.61	\$ 1,266.81
	Conference room Chairs	8	\$ 245.10	\$ 1,960.80	\$ 980.40
	Conference Credenza	1	\$ 875.22	\$ 875.22	\$ 437.61
	Conference room TV	1	\$ 1,218.33	\$ 1,218.33	\$ 609.17
				\$ 57,671.75	\$ 28,835.88

	<u>Est. Current</u> <u>Value (50%)</u>
Wild Wings Café Support Center	46,277
Wild Wing of Aiken, LLC	138,165
SW Charlotte, LLC	72,776
Wild Wing of Hilton Head, LLC	36,816
Savannah WWC, LLC	82,767
Wilmington Wings, LLC	73,082
Rock Hill Wings LLC	79,699
Restaurant Equipment	529,583

Address:

Extra Space Storage Units #446, 449, 549 & 2077	Charlotte, NC 28217
470 Fabian Drive	Aiken, SC 29803
Public Storage 9400 S Tryon St Unit E50 & F65	Charlotte, NC 28273
Extra Space Storage 10140 S Tryon St Unit # 501	Charlotte, NC 28273
Public Storage 9400 S Tryon St Unit L 48	Charlotte, NC 28273
Public Storage 6441 Westgate Rd Unit # 723, # 725, # 731	Raleigh, NC 27617
Public Storage 9400 S Tryon St Unit I54	Charlotte, NC 28273
Extra Space Storage 10140 S Tryon St Units #115, 613	Charlotte, NC 28217

**Wild Wing Café Sikes Support Center Office Inventory
Extra Space Storage Unit # 446, Unit # 449, Unit # 549 & Unit # 2077
Charlotte, NC 28217**

	Description	Quantity	New Purchase Cost	Total	Current 50% Value
	Office Desk	4	\$ 1,781.63	\$ 7,126.52	\$ 3,563.26
	Office Desk Book Case	4	\$ 758.90	\$ 3,035.60	\$ 1,517.80
	Desk Chairs	12	\$ 139.00	\$ 1,668.00	\$ 834.00
	Office Chairs	18	\$ 125.44	\$ 2,257.92	\$ 1,128.96
	Mahogany DR Chair	59	\$ 79.99	\$ 4,719.41	\$ 2,359.71
	Mahogany Barstool	36	\$ 119.99	\$ 4,319.64	\$ 2,159.82
	Office side Tables	2	\$ 255.63	\$ 511.26	\$ 255.63
	Book Cases	1	\$ 751.00	\$ 751.00	\$ 375.50
	Wood File Cabinets	2	\$ 351.16	\$ 702.32	\$ 351.16
	Metal File Cabinets	9	\$ 655.23	\$ 5,897.07	\$ 2,948.54
	Computers	2	\$ 815.66	\$ 1,631.32	\$ 815.66
	Computers	1	\$ 1,212.45	\$ 1,212.45	\$ 606.23
	Desk Monitors	8	\$ 117.22	\$ 937.76	\$ 468.88
	Office desk Printers	5	\$ 175.89	\$ 879.45	\$ 439.73
	Office TV's	1	\$ 350.00	\$ 350.00	\$ 175.00
	Office TV's 72 "	1	\$ 750.00	\$ 750.00	\$ 375.00
	Break room Table & Chairs	1	\$ 450.81	\$ 450.81	\$ 225.41
	Conference Credenza	2	\$ 875.22	\$ 1,750.44	\$ 875.22
	Cubicals	12	\$ 1,218.33	\$ 14,619.96	\$ 7,309.98
	Desk for Cubicals	12	\$ 371.95	\$ 4,463.40	\$ 2,231.70
	Trash Cans	4	\$ 4.99	\$ 19.96	\$ 9.98
	Dining Room Table 36"	11	\$ 427.88	\$ 4,706.68	\$ 2,353.34
	Dining Room Table 48"	10	\$ 535.00	\$ 5,350.00	\$ 2,675.00
	Dining Room Round Table	2	\$ 535.00	\$ 1,070.00	\$ 535.00
	Pizza oven	1	\$ 4,200.00	\$ 4,200.00	\$ 2,100.00
	2 door File Cabinet	1	\$ 350.00	\$ 350.00	\$ 175.00
	Ayrsley Safe	1	\$ 1,200.00	\$ 1,200.00	\$ 600.00
	Piano	1	\$ 200.00	\$ 200.00	\$ 100.00
	Paper cutter	1	\$ 285.33	\$ 285.33	\$ 142.67
	Metro Shelves	2	\$ 441.18	\$ 882.36	\$ 441.18
	Mahogany Desk 84"	1	\$ 3,416.22	\$ 3,416.22	\$ 1,708.11
	Mahogany Bookcase	1	\$ 1,721.37	\$ 1,721.37	\$ 860.68
	Stage Equipment	1	\$ 27,350.00	\$ 27,350.00	\$ 13,675.00
	True Mug Chiller	1	\$ 1,756.33	\$ 1,756.33	\$ 878.17
	Gas Fryers	2	\$ 2,775.18	\$ 5,550.36	\$ 2,775.18
				\$ 92,454.59	\$ 46,227.29

Aiken Wild Wing Café Equipment Inventory

470 Fabian Dr.

Aiken, SC 29803

	Description	Quantity	New Purchase Cost	Total	Current 50% Value
	DINING ROOM				
	DINING ROOM TABLES 4 TOP	6	\$ 427.88	\$ 2,567.28	\$ 1,283.64
	DINING ROOM TABLES 6 TOP	6	\$ 845.16	\$ 5,070.96	\$ 2,535.48
	DINING ROOM TABLE ROUND	2	\$ 635.19	\$ 1,270.38	\$ 635.19
	DINING ROOM BOOTHS 4 TOP		\$ 864.98	\$ -	\$ -
	DINING ROOM BOOTHS 6 TOP		\$ 667.89	\$ -	\$ -
	DINING ROOM CORNER BOOTHS		\$ 2,759.18	\$ -	\$ -
	MAHOGANY DINING ROOM CHAIRS	70	\$ 79.99	\$ 5,599.30	\$ 2,799.65
	BLACK METAL DINING ROOM CHAIRS		\$ 49.99	\$ -	\$ -
	MAHOGGANY WOOD BARSTOOLS	14	\$ 119.99	\$ 1,679.86	\$ 839.93
	MAHOGGANY SHORT BAR CHAIRS	10	\$ 253.16	\$ 2,531.60	\$ 1,265.80
	BLACK METAL BARSTOOLS		\$ 89.18	\$ -	\$ -
	HIGH TOP TABLES		\$ 481.33	\$ -	\$ -
	CUSTOM WING BAR		\$ 9,723.15	\$ -	\$ -
	PATIO TABLES		\$ 481.66	\$ -	\$ -
	PATIO CHAIRS		\$ 217.00	\$ -	\$ -
	ANIRONDACK CHAIRS		\$ 402.77	\$ -	\$ -
	FIRE PITS		\$ 335.00	\$ -	\$ -
	TALL MUSHROOM FIRE PITS		\$ 335.00	\$ -	\$ -
	STAGE SOUND EQUIPMENT	1	\$ 27,350.00	\$ 27,350.00	\$ 13,675.00
	STEREO EQUIPMENT	1	\$ 6,500.00	\$ 6,500.00	\$ 3,250.00
	TV'S	22	\$ 417.22	\$ 9,178.84	\$ 4,589.42
	BAR EQUIPMENT				
	BAR WALK-IN COOLER		\$ 12,475.00	\$ -	\$ -
	TOP LOAD 2 DOOR	2	\$ 1,669.00	\$ 3,338.00	\$ 1,669.00
	TOP LOAD 3 DOOR	2	\$ 1,999.00	\$ 3,998.00	\$ 1,999.00
	FRONT LOAD 2 DOOR	2	\$ 1,789.00	\$ 3,578.00	\$ 1,789.00
	FRONT LOAD 3 DOOR		\$ 2,349.00	\$ -	\$ -
	KEGERATOR COOLER	2	\$ 6,723.15	\$ 13,446.30	\$ 6,723.15
	MUG CHILLER SINGLE	2	\$ 1,289.00	\$ 2,578.00	\$ 1,289.00
	MUG CHILLER DOUBLE		\$ 3,471.00	\$ -	\$ -
	S/S BOTTLE WELL RACKS	2	\$ 435.00	\$ 870.00	\$ 435.00
	S/S ICE BINS	2	\$ 494.10	\$ 988.20	\$ 494.10
	S/S GLASS RACK HOLDERS	2	\$ 494.00	\$ 988.00	\$ 494.00
	KITCHEN				
	EPOXY WIRE SHELVING W/ POSTS IN KITCHEN	12	\$ 365.00	\$ 4,380.00	\$ 2,190.00
	PREP WORK TABLE 30 X 96 INCH	1	\$ 1,730.00	\$ 1,730.00	\$ 865.00
	PREP WORK TABLE 30 X 84 INCH	1	\$ 1,487.00	\$ 1,487.00	\$ 743.50
	PREP WORK TABLE 30 X 72 INCH	1	\$ 1,137.15	\$ 1,137.15	\$ 568.58
	PREP WORK TABLE 30 X 48 INCH	2	\$ 988.65	\$ 1,977.30	\$ 988.65
	PREP WORK TABLE 30 X 36 INCH	1	\$ 932.40	\$ 932.40	\$ 466.20
	S/S 3-COMPARTMENT SINK W/ DRAINBOARDS	1	\$ 3,966.00	\$ 3,966.00	\$ 1,983.00
	S/S WALL SHELF 48" x 16"		\$ 285.00	\$ -	\$ -
	S/S WALL SHELF, 18" X 48"		\$ 315.00	\$ -	\$ -
	S/S WALL SHELF, 12" X 72"	2	\$ 423.00	\$ 846.00	\$ 423.00
	S/S WALL SHELF, 12" X 60"	1	\$ 373.16	\$ 373.16	\$ 186.58
	POT RACK	1	\$ 563.00	\$ 563.00	\$ 281.50
	BREAD / BUN RACKS		\$ 175.33	\$ -	\$ -
	WALK-IN COOLER BOX W/ LIGHTS	1	\$ 50,471.00	\$ 50,471.00	\$ 25,235.50
	WALK-IN FREEZER BOX W/ LIGHTS		\$ -	\$ -	\$ -
	EPOXY WIRE SHELVING W/ POSTS IN COOLER	10	\$ 365.00	\$ 3,650.00	\$ 1,825.00
	DUNNAGE RACK	6	\$ 85.00	\$ 510.00	\$ 255.00
	UPRIGHT COOLERS SINGLE DOOR	3	\$ 2,499.00	\$ 7,497.00	\$ 3,748.50
	UPRIGHT COOLER DBL DOOR		\$ 3,699.00	\$ -	\$ -
	UPRIGHT FREEZER SINGLE DOOR	1	\$ 2,687.15	\$ 2,687.15	\$ 1,343.58
	28" REFRIGERATED LINE COOLER		\$ 2,032.00	\$ -	\$ -
	36" REFRIGERATED LINE COOLER		\$ 2,040.99	\$ -	\$ -
	48" REFRIGERATED PREP TABLE	2	\$ 2,192.00	\$ 4,384.00	\$ 2,192.00
	60" REFRIGERATED PREP TABLE	1	\$ 2,615.17	\$ 2,615.17	\$ 1,307.59

	36" LINE FREEZER		\$ 2,233.41	\$ -	\$ -
	48" LINE FREEZER	1	\$ 2,551.16	\$ 2,551.16	\$ 1,275.58
	4 BURNER STOVE / OVEN	1	\$ 1,449.18	\$ 1,449.18	\$ 724.59
	4 BURNER STOVE		\$ 1,169.00	\$ -	\$ -
	4 BURNER EQUIPMENT STAND		\$ 325.00	\$ -	\$ -
	ALTO SHAM OVEN		\$ 15,557.31	\$ -	\$ -
	CONVEYOR OVEN	1	\$ 35,450.00	\$ 35,450.00	\$ 17,725.00
	GRILL CONVEYOR OVEN		\$ 8,500.00	\$ -	\$ -
	CHEESEMELTER	1	\$ 2,350.66	\$ 2,350.66	\$ 1,175.33
	S/S MICROWAVE SHELF, 24" W	1	\$ 447.22	\$ 447.22	\$ 223.61
	MICROWAVE	1	\$ 135.17	\$ 135.17	\$ 67.59
	FLAT TOP GRILL	1	\$ 2,149.33	\$ 2,149.33	\$ 1,074.67
	FLAT TOP GRILL 72"		\$ 3,155.23	\$ -	\$ -
	36" CHARBROILER		\$ 1,135.66	\$ -	\$ -
	72" REFRIGERATED EQUIPMENT STAND		\$ 7,561.00	\$ -	\$ -
	72" NON REFRIGERATED EQUIPMENT STAND	1	\$ 2,361.55	\$ 2,361.55	\$ 1,180.78
	GAS FRYERS	4	\$ 2,775.18	\$ 11,100.72	\$ 5,550.36
	TIMER	2	\$ 135.17	\$ 270.34	\$ 135.17
	SHORTENING CADDY	1	\$ 857.45	\$ 857.45	\$ 428.73
	HEATED HOLDING CABINET VERTICAL		\$ 2,699.33	\$ -	\$ -
	HEATED HOLDING / COOLER COMBO		\$ 7,615.22	\$ -	\$ -
	4 WELL HEATED STEAM TABLE	1	\$ 1,909.55	\$ 1,909.55	\$ 954.78
	DRAWER WARMER	1	\$ 1,317.22	\$ 1,317.22	\$ 658.61
	FOOD PAN WARMER		\$ 209.00	\$ -	\$ -
	SAUCE TABLE	1	\$ 4,035.61	\$ 4,035.61	\$ 2,017.81
	COUNTER TOP FRENCH FRY WARMER	1	\$ 1,337.00	\$ 1,337.00	\$ 668.50
	FRENCH FRY WARMER	1	\$ 583.00	\$ 583.00	\$ 291.50
	COOKLINE EXHAUST HOOD	1	\$ 28,247.99	\$ 28,247.99	\$ 14,124.00
	FIRE SYSTEM	1	\$ 6,542.11	\$ 6,542.11	\$ 3,271.06
	EXHAUST HOOD FAN	1	\$ 8,765.00	\$ 8,765.00	\$ 4,382.50
	ICE BIN		\$ 4,400.00	\$ -	\$ -
	ICE MACHINE		\$ 7,800.00	\$ -	\$ -
	WATER FILTRATION		\$ 840.00	\$ -	\$ -
			\$ 17,566.00	\$ -	\$ -
	SMALLWARES	1	\$ 300.00	\$ 300.00	\$ 150.00
	MISC. ARTWORK	1	\$ 500.00	\$ 500.00	\$ 250.00
	OFFICE COMPUTER / PRINTE / MONITOR	1	\$ 550.00	\$ 550.00	\$ 275.00
	OFFICE FURNITURE	1	\$ 650.00	\$ 650.00	\$ 325.00
	FILE CABINET	1	\$ 75.00	\$ 75.00	\$ 37.50
	SAFE	1	\$ 375.00	\$ 375.00	\$ 187.50
				\$ 276,329.93	\$ 138,164.97

Ayrsley Wild Wing Café Equipment Inventory

Public Storage Unit # E 50 & F 65

Charlotte NC, 28273

	Description	Quantity	New Purchase Cost	Total	Current 50% Value
	DINING ROOM				
	DINING ROOM TABLES 4 TOP	7	\$ 427.88	\$ 2,995.16	\$ 1,497.58
	DINING ROOM TABLES 6 TOP		\$ 845.16	\$ -	\$ -
	DINING ROOM TABLE ROUND		\$ 635.19	\$ -	\$ -
	DINING ROOM BOOTHS 4 TOP		\$ 864.98	\$ -	\$ -
	DINING ROOM BOOTHS 6 TOP		\$ 667.89	\$ -	\$ -
	DINING ROOM CORNER BOOTHS		\$ 2,759.18	\$ -	\$ -
	MAHOGANY DINING ROOM CHAIRS	31	\$ 79.99	\$ 2,479.69	\$ 1,239.85
	BLACK METAL DINING ROOM CHAIRS	12	\$ 49.99	\$ 599.88	\$ 299.94
	MAHOGGANY WOOD BARSTOOLS	13	\$ 119.99	\$ 1,559.87	\$ 779.94
	BLACK METAL BARSTOOLS	4	\$ 89.18	\$ 356.72	\$ 178.36
	HIGH TOP TABLES		\$ 481.33	\$ -	\$ -
	CUSTOM WING BAR		\$ 9,723.15	\$ -	\$ -
	PATIO TABLES		\$ 481.66	\$ -	\$ -
	PATIO CHAIRS		\$ 217.00	\$ -	\$ -
	ANIRONDACK CHAIRS		\$ 402.77	\$ -	\$ -
	FIRE PITS	3	\$ 335.00	\$ 1,005.00	\$ 502.50
	TALL MUSHROOM FIRE PITS	3	\$ 335.00	\$ 1,005.00	\$ 502.50
	STAGE SOUND EQUIPMENT	1	\$ 27,350.00	\$ 27,350.00	\$ 13,675.00
	STEREO EQUIPMENT	1	\$ 6,500.00	\$ 6,500.00	\$ 3,250.00
	TV'S	17	\$ 417.22	\$ 7,092.74	\$ 3,546.37
	BAR EQUIPMENT				
	BAR WALK-IN COOLER		\$ 12,475.00	\$ -	\$ -
	TOP LOAD 2 DOOR	1	\$ 1,669.00	\$ 1,669.00	\$ 834.50
	TOP LOAD 3 DOOR	1	\$ 1,999.00	\$ 1,999.00	\$ 999.50
	FRONT LOAD 2 DOOR	2	\$ 1,789.00	\$ 3,578.00	\$ 1,789.00
	FRONT LOAD 3 DOOR		\$ 2,349.00	\$ -	\$ -
	MUG CHILLER SINGLE	1	\$ 1,289.00	\$ 1,289.00	\$ 644.50
	MUG CHILLER DOUBLE	1	\$ 3,471.00	\$ 3,471.00	\$ 1,735.50
	S/S BOTTLE WELL RACKS		\$ 435.00	\$ -	\$ -
	S/S ICE BINS	1	\$ 494.10	\$ 494.10	\$ 247.05
	S/S GLASS RACK HOLDERS	1	\$ 494.00	\$ 494.00	\$ 247.00
	KITCHEN				
	EPOXY WIRE SHELVING W/ POSTS IN KITCHEN	4	\$ 365.00	\$ 1,460.00	\$ 730.00
	PREP WORK TABLE 30 X 96 INCH	1	\$ 1,730.00	\$ 1,730.00	\$ 865.00
	PREP WORK TABLE 30 X 84 INCH	1	\$ 1,487.00	\$ 1,487.00	\$ 743.50
	PREP WORK TABLE 30 X 72 INCH	2	\$ 1,137.15	\$ 2,274.30	\$ 1,137.15
	PREP WORK TABLE 30 X 48 INCH	2	\$ 988.65	\$ 1,977.30	\$ 988.65
	PREP WORK TABLE 30 X 36 INCH	1	\$ 932.40	\$ 932.40	\$ 466.20
	S/S 3-COMPARTMENT SINK W/ DRAINBOARDS		\$ 3,966.00	\$ -	\$ -
	S/S WALL SHELF 48" x 16"		\$ 285.00	\$ -	\$ -
	S/S WALL SHELF, 18" X 48"		\$ 315.00	\$ -	\$ -
	S/S WALL SHELF, 12" X 72"		\$ 423.00	\$ -	\$ -
	S/S WALL SHELF, 12" X 60"		\$ 373.16	\$ -	\$ -
	POT RACK		\$ 563.00	\$ -	\$ -
	BREAD / BUN RACKS		\$ 175.33	\$ -	\$ -
	WALK-IN COOLER BOX W/ LIGHTS		\$ 50,471.00	\$ -	\$ -
	WALK-IN FREEZER BOX W/ LIGHTS			\$ -	\$ -
	EPOXY WIRE SHELVING W/ POSTS IN COOLER		\$ 365.00	\$ -	\$ -
	DUNNAGE RACK	8	\$ 85.00	\$ 680.00	\$ 340.00
	UPRIGHT COOLERS SINGLE DOOR		\$ 2,499.00	\$ -	\$ -
	UPRIGHT COOLER DBL DOOR		\$ 3,699.00	\$ -	\$ -
	UPRIGHT FREEZER SINGLE DOOR		\$ 2,687.15	\$ -	\$ -
	28" REFRIGERATED LINE COOLER		\$ 2,032.00	\$ -	\$ -
	36" REFRIGERATED LINE COOLER		\$ 2,040.99	\$ -	\$ -
	48" REFRIGERATED PREP TABLE	1	\$ 2,192.00	\$ 2,192.00	\$ 1,096.00
	60" REFRIGERATED PREP TABLE		\$ 2,615.17	\$ -	\$ -
	36" LINE FREEZER		\$ 2,233.41	\$ -	\$ -
	48" LINE FREEZER	1	\$ 2,551.16	\$ 2,551.16	\$ 1,275.58

	4 BURNER STOVE / OVEN	1	\$ 1,449.18	\$ 1,449.18	\$ 724.59
	4 BURNER STOVE		\$ 1,169.00	\$ -	\$ -
	4 BURNER EQUIPMENT STAND		\$ 325.00	\$ -	\$ -
	ALTO SHAM OVEN	1	\$ 15,557.31	\$ 15,557.31	\$ 7,778.66
	CONVEYOR OVEN	1	\$ 35,450.00	\$ 35,450.00	\$ 17,725.00
	GRILL CONVEYOR OVEN	1	\$ 8,500.00	\$ 8,500.00	\$ 4,250.00
	CHEESEMELTER		\$ 2,350.66	\$ -	\$ -
	S/S MICROWAVE SHELF, 24" W		\$ 447.22	\$ -	\$ -
	MICROWAVE		\$ 135.17	\$ -	\$ -
	FLAT TOP GRILL		\$ 2,149.33	\$ -	\$ -
	FLAT TOP GRILL 72"		\$ 3,155.23	\$ -	\$ -
	36" CHARBROILER		\$ 1,135.66	\$ -	\$ -
	72" REFRIGERATED EQUIPMENT STAND	1	\$ 7,561.00	\$ 7,561.00	\$ 3,780.50
	72" NON REFRIGERATED EQUIPMENT STAND		\$ 2,361.55	\$ -	\$ -
	GAS FRYERS		\$ 2,775.18	\$ -	\$ -
	TIMER		\$ 135.17	\$ -	\$ -
	SHORTENING CADDY	1	\$ 857.45	\$ 857.45	\$ 428.73
	HEATED HOLDING CABINET VERTICAL		\$ 2,699.33	\$ -	\$ -
	HEATED HOLDING / COOLER COMBO		\$ 7,615.22	\$ -	\$ -
	4 WELL HEATED STEAM TABLE		\$ 1,909.55	\$ -	\$ -
	DRAWER WARMER		\$ 1,317.22	\$ -	\$ -
	FOOD PAN WARMER		\$ 209.00	\$ -	\$ -
	SAUCE TABLE	1	\$ 4,035.61	\$ 4,035.61	\$ 2,017.81
	COUNTER TOP FRENCH FRY WARMER	1	\$ 1,337.00	\$ 1,337.00	\$ 668.50
	FRENCH FRY WARMER	1	\$ 583.00	\$ 583.00	\$ 291.50
	COOKLINE EXHAUST HOOD		\$ 28,247.99	\$ -	\$ -
	FIRE SYSTEM		\$ 6,542.11	\$ -	\$ -
	EXHAUST HOOD FAN		\$ 8,765.00	\$ -	\$ -
	ICE BIN		\$ 4,400.00	\$ -	\$ -
	ICE MACHINE		\$ 7,800.00	\$ -	\$ -
	WATER FILTRATION		\$ 840.00	\$ -	\$ -
			\$ 17,566.00	\$ -	\$ -
	SMALLWARES	1	\$ 300.00	\$ 300.00	\$ 150.00
	MISC. ARTWORK				
	OFFICE COMPUTER / PRINTE / MONITOR	1	\$ 550.00	\$ 550.00	\$ 275.00
	OFFICE FURNITURE		\$ 650.00	\$ -	\$ -
	FILE CABINET	2	\$ 75.00	\$ 150.00	\$ 75.00
				\$ 145,551.55	\$ 72,775.78

Hilton Head Wild Wing Café Equipment Inventory

Extra Space Storage Unit # 501 10140 S Tryon

Charlotte NC, 28273

		Quantity	New Purchase Cost	Total	Current 50% Value
	DINING ROOM				
	DINING ROOM TABLES 2 TOP & Base		\$ 310.00	\$ -	\$ -
	DINING ROOM TABLES 4 TOP & BASE		\$ 427.88	\$ -	\$ -
	DINING ROOM TABLES 6 TOP & BASE		\$ 845.16	\$ -	\$ -
	DINING ROOM TABLE ROUND & BASE		\$ 635.19	\$ -	\$ -
	DINING ROOM BOOTHS 4 TOP		\$ 864.98	\$ -	\$ -
	DINING ROOM BOOTHS 6 TOP		\$ 667.89	\$ -	\$ -
	DINING ROOM CORNER BOOTHS		\$ 2,759.18	\$ -	\$ -
	MAHOGGANY DINING ROOM CHAIRS		\$ 79.99	\$ -	\$ -
	BLACK METAL DINING ROOM CHAIRS		\$ 49.99	\$ -	\$ -
	MAHOGGANY WOOD BARSTOOLS		\$ 119.99	\$ -	\$ -
	BLACK METAL BARSTOOLS		\$ 89.18	\$ -	\$ -
	HIGH TOP TABLES		\$ 481.33	\$ -	\$ -
	CUSTOM WING BAR		\$ 9,723.15	\$ -	\$ -
	PATIO TABLES		\$ 481.66	\$ -	\$ -
	PATIO CHAIRS		\$ 217.00	\$ -	\$ -
	ANIRONDACK CHAIRS	36	\$ 402.77	\$ 14,499.72	\$ 7,249.86
	FIRE PITS	3	\$ 335.00	\$ 1,005.00	\$ 502.50
	STAGE SOUND EQUIPMENT	1	\$ 27,350.00	\$ 27,350.00	\$ 13,675.00
	STEREO EQUIPMENT	1	\$ 6,500.00	\$ 6,500.00	\$ 3,250.00
	TV'S	14	\$ 417.22	\$ 5,841.08	\$ 2,920.54
	BAR EQUIPMENT				
	BAR WALK-IN COOLER		\$ 12,475.00	\$ -	\$ -
	TOP LOAD 2 DOOR		\$ 1,669.00	\$ -	\$ -
	TOP LOAD 3 DOOR		\$ 1,999.00	\$ -	\$ -
	FRONT LOAD 2 DOOR		\$ 1,789.00	\$ -	\$ -
	FRONT LOAD 3 DOOR		\$ 2,349.00	\$ -	\$ -
	MUG CHILLER SINGLE		\$ 1,289.00	\$ -	\$ -
	MUG CHILLER DOUBLE	1	\$ 3,471.00	\$ 3,471.00	\$ 1,735.50
	S/S BOTTLE WELL RACKS	1	\$ 435.00	\$ 435.00	\$ 217.50
	S/S ICE BINS		\$ 494.10	\$ -	\$ -
	S/S GLASS RACK HOLDERS		\$ 494.00	\$ -	\$ -
	KITCHEN				
	EPOXY WIRE SHELVEING W/ POSTS IN KITCHEN	2	\$ 365.00	\$ 730.00	\$ 365.00
	PREP WORK TABLE 30 X 96 INCH		\$ 1,730.00	\$ -	\$ -
	PREP WORK TABLE 30 X 84 INCH		\$ 1,487.00	\$ -	\$ -
	PREP WORK TABLE 30 X 72 INCH		\$ 1,137.15	\$ -	\$ -
	PREP WORK TABLE 30 X 48 INCH	2	\$ 988.65	\$ 1,977.30	\$ 988.65
	PREP WORK TABLE 30 X 36 INCH	1	\$ 435.60	\$ 435.60	\$ 217.80
	PREP WORK TABLE 24 X 24 INCH	1	\$ 375.13	\$ 375.13	\$ 187.57
	S/S 3-COMPARTMENT SINK W/ DRAINBOARDS		\$ 3,966.00	\$ -	\$ -
	S/S WALL SHELF 48" x 16"		\$ 285.00	\$ -	\$ -
	S/S WALL SHELF, 18" X 48"		\$ 315.00	\$ -	\$ -
	S/S WALL SHELF, 12" X 72"		\$ 423.00	\$ -	\$ -
	S/S WALL SHELF, 12" X 60"		\$ 373.16	\$ -	\$ -
	POT RACK		\$ 563.00	\$ -	\$ -
	BREAD / BUN RACKS		\$ 175.33	\$ -	\$ -
	WALK-IN COOLER BOX W/ LIGHTS		\$ 50,471.00	\$ -	\$ -
	WALK-IN FREEZER BOX W/ LIGHTS			\$ -	\$ -
	EPOXY WIRE SHELVEING W/ POSTS IN COOLER		\$ 365.00	\$ -	\$ -
	DUNNAGE RACK		\$ 85.00	\$ -	\$ -
	UPRIGHT COOLERS SINGLE DOOR	1	\$ 2,499.00	\$ 2,499.00	\$ 1,249.50
	UPRIGHT COOLER DBL DOOR		\$ 3,699.00	\$ -	\$ -
	UPRIGHT FREEZER SINGLE DOOR		\$ 2,687.15	\$ -	\$ -
	SMALL CHEST FREEZER		\$ 200.00	\$ -	\$ -
	28" REFRIGERATED LINE COOLER		\$ 2,032.00	\$ -	\$ -
	36" REFRIGERATED LINE COOLER		\$ 2,040.99	\$ -	\$ -

48" REFRIGERATED PREP TABLE	1	\$ 2,192.00	\$ 2,192.00	\$ 1,096.00
60" REFRIGERATED PREP TABLE		\$ 2,615.17	\$ -	\$ -
36" LINE FREEZER		\$ 2,233.41	\$ -	\$ -
48" LINE FREEZER		\$ 2,551.16	\$ -	\$ -
RED BULL COOLERS		\$ 125.00	\$ -	\$ -
4 BURNER STOVE / OVEN		\$ 1,449.18	\$ -	\$ -
4 BURNER STOVE		\$ 1,169.00	\$ -	\$ -
4 BURNER EQUIPMENT STAND		\$ 325.00	\$ -	\$ -
BLODGETT OVEN		\$ 15,557.31	\$ -	\$ -
CONVEYOR OVEN		\$ 35,450.00	\$ -	\$ -
CHEESEMELTER		\$ 2,350.66	\$ -	\$ -
S/S MICROWAVE SHELF, 24" W		\$ 447.22	\$ -	\$ -
MICROWAVE		\$ 135.17	\$ -	\$ -
FLAT TOP GRILL		\$ 2,149.33	\$ -	\$ -
FLAT TOP GRILL 72"		\$ 3,155.23	\$ -	\$ -
COOLER UNDER GRILL 72 inch		\$ 7,561.00	\$ -	\$ -
36" CHARBROILER		\$ 1,135.66	\$ -	\$ -
72" REFRIGERATED EQUIPMENT STAND		\$ 2,699.33	\$ -	\$ -
72" NON REFRIGERATED EQUIPMENT STAND		\$ 2,361.55	\$ -	\$ -
GAS FRYERS		\$ 2,775.18	\$ -	\$ -
TIMER	1	\$ 135.17	\$ 135.17	\$ 67.59
SHORTENING CADDY		\$ 857.45	\$ -	\$ -
HEATED HOLDING CABINET VERTICAL		\$ 2,699.33	\$ -	\$ -
HEATED HOLDING / COOLER COMBO		\$ 7,615.22	\$ -	\$ -
4 WELL HEATED STEAM TABLE		\$ 1,909.55	\$ -	\$ -
DRAWER WARMER		\$ 1,317.22	\$ -	\$ -
FOOD PAN WARMER		\$ 209.00	\$ -	\$ -
2ND WINDOW HEATER		\$ 3,500.00	\$ -	\$ -
SAUCE TABLE		\$ 4,035.61	\$ -	\$ -
COUNTER TOP FRENCH FRY WARMER		\$ 1,337.00	\$ -	\$ -
FRENCH FRY WARMER		\$ 583.00	\$ -	\$ -
COOKLINE EXHAUST HOOD		\$ 28,247.99	\$ -	\$ -
FIRE SYSTEM		\$ 6,542.11	\$ -	\$ -
EXHAUST HOOD FAN		\$ 8,765.00	\$ -	\$ -
ICE BIN		\$ 4,400.00	\$ -	\$ -
ICE MACHINE		\$ 11,995.00	\$ -	\$ -
WATER FILTRATION		\$ 840.00	\$ -	\$ -
SMALLWARES	1	\$ 17,566.44	\$ 17,566.44	\$ 8,783.22
SAFE	1	\$ 500.00	\$ 500.00	\$ 250.00
ARTWORK	0.25	\$ 12,000.00	\$ 3,000.00	\$ 1,500.00
OFFICE COMPUTER / PRINTE / MONITOR	1	\$ 550.00	\$ 550.00	\$ 275.00
OFFICE FURNITURE		\$ 650.00	\$ -	\$ -
FILE CABINET	1	\$ 75.00	\$ 75.00	\$ 37.50
			\$ 73,632.72	\$ 36,816.36

Savannah Wild Wing Café Equipment Inventory

Public Storage Unit L 48

Charlotte NC, 28273

	Description	Quantity	New Purchase Cost	Total	Current 50% Value
	DINING ROOM				
	DINING ROOM TABLES 2 TOP & Base	8	\$ 310.00	\$ 2,480.00	\$ 1,240.00
	DINING ROOM TABLES 4 TOP & BASE		\$ 427.88	\$ -	\$ -
	DINING ROOM TABLES 6 TOP & BASE	11	\$ 845.16	\$ 9,296.76	\$ 4,648.38
	DINING ROOM TABLE ROUND & BASE	6	\$ 635.19	\$ 3,811.14	\$ 1,905.57
	DINING ROOM BOOTHS 4 TOP	6	\$ 864.98	\$ 5,189.88	\$ 2,594.94
	DINING ROOM BOOTHS 6 TOP	3	\$ 667.89	\$ 2,003.67	\$ 1,001.84
	DINING ROOM CORNER BOOTHS		\$ 2,759.18	\$ -	\$ -
	MAHOGGANY DINING ROOM CHAIRS	33	\$ 79.99	\$ 2,639.67	\$ 1,319.84
	BLACK METAL DINING ROOM CHAIRS		\$ 49.99	\$ -	\$ -
	MAHOGGANY WOOD BARSTOOLS	27	\$ 119.99	\$ 3,239.73	\$ 1,619.87
	BLACK METAL BARSTOOLS		\$ 89.18	\$ -	\$ -
	HIGH TOP TABLES		\$ 481.33	\$ -	\$ -
	CUSTOM WING BAR		\$ 9,723.15	\$ -	\$ -
	PATIO TABLES	10	\$ 481.66	\$ 4,816.60	\$ 2,408.30
	PATIO CHAIRS	66	\$ 217.00	\$ 14,322.00	\$ 7,161.00
	ANIRONDACK CHAIRS		\$ 402.77	\$ -	\$ -
	FIRE PITS		\$ 335.00	\$ -	\$ -
	UMBRELLAS	10	\$ 410.00	\$ 4,100.00	\$ 2,050.00
	ROPE & STANTIONS	24	\$ 56.33	\$ 1,351.92	\$ 675.96
	UMBRELLAS	10	\$ 410.00	\$ 4,100.00	\$ 2,050.00
	UMBRELLAS	10	\$ 410.00	\$ 4,100.00	\$ 2,050.00
				\$ -	\$ -
	STAGE SOUND EQUIPMENT	1	\$ 27,350.00	\$ 27,350.00	\$ 13,675.00
	STEREO EQUIPMENT	1	\$ 6,500.00	\$ 6,500.00	\$ 3,250.00
	TV'S	10	\$ 417.22	\$ 4,172.20	\$ 2,086.10
	BAR EQUIPMENT				
	BAR WALK-IN COOLER		\$ 12,475.00	\$ -	\$ -
	TOP LOAD 2 DOOR		\$ 1,669.00	\$ -	\$ -
	TOP LOAD 3 DOOR	1	\$ 1,999.00	\$ 1,999.00	\$ 999.50
	FRONT LOAD 2 DOOR	1	\$ 1,789.00	\$ 1,789.00	\$ 894.50
	FRONT LOAD 3 DOOR		\$ 2,349.00	\$ -	\$ -
	MUG CHILLER SINGLE		\$ 1,289.00	\$ -	\$ -
	MUG CHILLER DOUBLE	1	\$ 3,471.00	\$ 3,471.00	\$ 1,735.50
	S/S BOTTLE WELL RACKS	1	\$ 435.00	\$ 435.00	\$ 217.50
	S/S ICE BINS	1	\$ 494.10	\$ 494.10	\$ 247.05
	S/S GLASS RACK HOLDERS	1	\$ 494.00	\$ 494.00	\$ 247.00
	KITCHEN				
	EPOXY WIRE SHELIVING W/ POSTS IN KITCHEN	10	\$ 365.00	\$ 3,650.00	\$ 1,825.00
	PREP WORK TABLE 30 X 96 INCH		\$ 1,730.00	\$ -	\$ -
	PREP WORK TABLE 30 X 84 INCH	1	\$ 1,487.00	\$ 1,487.00	\$ 743.50
	PREP WORK TABLE 30 X 72 INCH	1	\$ 1,137.15	\$ 1,137.15	\$ 568.58
	PREP WORK TABLE 30 X 48 INCH	1	\$ 988.65	\$ 988.65	\$ 494.33
	PREP WORK TABLE 30 X 36 INCH	1	\$ 435.60	\$ 435.60	\$ 217.80
	PREP WORK TABLE 24 X 24 INCH	1	\$ 375.13	\$ 375.13	\$ 187.57
	S/S 3-COMPARTMENT SINK W/ DRAINBOARDS		\$ 3,966.00	\$ -	\$ -
	S/S WALL SHELF 48" x 16"	1	\$ 285.00	\$ 285.00	\$ 142.50
	S/S WALL SHELF, 18" X 48"	1	\$ 315.00	\$ 315.00	\$ 157.50
	S/S WALL SHELF, 12" X 72"		\$ 423.00	\$ -	\$ -
	S/S WALL SHELF, 12" X 60"		\$ 373.16	\$ -	\$ -
	POT RACK		\$ 563.00	\$ -	\$ -
	BREAD / BUN RACKS	2	\$ 175.33	\$ 350.66	\$ 175.33
				\$ -	\$ -
	WALK-IN COOLER BOX W/ LIGHTS		\$ 50,471.00	\$ -	\$ -
	WALK-IN FREEZER BOX W/ LIGHTS			\$ -	\$ -
	EPOXY WIRE SHELIVING W/ POSTS IN COOLER		\$ 365.00	\$ -	\$ -
	DUNNAGE RACK		\$ 85.00	\$ -	\$ -
	UPRIGHT COOLERS SINGLE DOOR	2	\$ 2,499.00	\$ 4,998.00	\$ 2,499.00
	UPRIGHT COOLER DBL DOOR	1	\$ 3,699.00	\$ 3,699.00	\$ 1,849.50
	UPRIGHT FREEZER SINGLE DOOR	1	\$ 2,687.15	\$ 2,687.15	\$ 1,343.58
	SMALL CHEST FREEZER	1	\$ 200.00	\$ 200.00	\$ 100.00

28" REFRIGERATED LINE COOLER		\$ 2,032.00	\$ -	\$ -
36" REFRIGERATED LINE COOLER	1	\$ 2,040.99	\$ 2,040.99	\$ 1,020.50
48" REFRIGERATED PREP TABLE	1	\$ 2,192.00	\$ 2,192.00	\$ 1,096.00
60" REFRIGERATED PREP TABLE	1	\$ 2,615.17	\$ 2,615.17	\$ 1,307.59
36" LINE FREEZER		\$ 2,233.41	\$ -	\$ -
48" LINE FREEZER		\$ 2,551.16	\$ -	\$ -
RED BULL COOLERS	2	\$ 125.00	\$ 250.00	\$ 125.00
				\$ -
4 BURNER STOVE / OVEN		\$ 1,449.18	\$ -	\$ -
4 BURNER STOVE		\$ 1,169.00	\$ -	\$ -
4 BURNER EQUIPMENT STAND		\$ 325.00	\$ -	\$ -
BLODGETT OVEN		\$ 15,557.31	\$ -	\$ -
CONVEYOR OVEN		\$ 35,450.00	\$ -	\$ -
CHEESEMELTER		\$ 2,350.66	\$ -	\$ -
S/S MICROWAVE SHELF, 24" W	1	\$ 447.22	\$ 447.22	\$ 223.61
MICROWAVE	1	\$ 135.17	\$ 135.17	\$ 67.59
FLAT TOP GRILL	1	\$ 2,149.33	\$ 2,149.33	\$ 1,074.67
FLAT TOP GRILL 72"		\$ 3,155.23	\$ -	\$ -
36" CHARBROILER		\$ 1,135.66	\$ -	\$ -
72" REFRIGERATED EQUIPMENT STAND		\$ 7,561.00	\$ -	\$ -
72" NON REFRIGERATED EQUIPMENT STAND		\$ 2,361.55	\$ -	\$ -
GAS FRYERS	3	\$ 2,775.18	\$ 8,325.54	\$ 4,162.77
TIMER	2	\$ 135.17	\$ 270.34	\$ 135.17
SHORTENING CADDY	1	\$ 857.45	\$ 857.45	\$ 428.73
HEATED HOLDING CABINET VERTICAL	1	\$ 2,699.33	\$ 2,699.33	\$ 1,349.67
HEATED HOLDING / COOLER COMBO		\$ 7,615.22	\$ -	\$ -
4 WELL HEATED STEAM TABLE	1	\$ 1,909.55	\$ 1,909.55	\$ 954.78
DRAWER WARMER	1	\$ 1,317.22	\$ 1,317.22	\$ 658.61
FOOD PAN WARMER	1	\$ 209.00	\$ 209.00	\$ 104.50
2ND WINDOW HEATER	1	\$ 3,500.00	\$ 3,500.00	\$ 1,750.00
SAUCE TABLE	1	\$ 4,035.61	\$ 4,035.61	\$ 2,017.81
COUNTER TOP FRENCH FRY WARMER	1	\$ 1,337.00	\$ 1,337.00	\$ 668.50
FRENCH FRY WARMER	1	\$ 583.00	\$ 583.00	\$ 291.50
COOKLINE EXHAUST HOOD		\$ 28,247.99	\$ -	\$ -
FIRE SYSTEM		\$ 6,542.11	\$ -	\$ -
EXHAUST HOOD FAN		\$ 8,765.00	\$ -	\$ -
			\$ -	\$ -
ICE BIN		\$ 4,400.00	\$ -	\$ -
ICE MACHINE		\$ 11,995.00	\$ -	\$ -
WATER FILTRATION		\$ 840.00	\$ -	\$ -
SMALLWARES	3	\$ 17,566.44	\$ 52,699.32	\$ 26,349.66
ARTWORK	3	\$ 1,200.00	\$ 3,600.00	\$ 1,800.00
BAND MARQUEE	1	\$ 5,400.00	\$ 5,400.00	\$ 2,700.00
EXTENSION LADDERS	2	\$ 300.00	\$ 600.00	\$ 300.00
PIANO	1	\$ 200.00	\$ 200.00	\$ 100.00
POWER WASHERS	2	\$ 199.00	\$ 398.00	\$ 199.00
MISCELLANEOUS TOOLS	1	\$ 300.00	\$ 300.00	\$ 150.00
OFFICE COMPUTER / PRINTE / MONITOR		\$ 550.00	\$ -	\$ -
OFFICE FURNITURE		\$ 650.00	\$ -	\$ -
FILE CABINET	2	\$ 75.00	\$ 150.00	\$ 75.00
			\$ 165,533.88	\$ 82,766.94

Raleigh / Wilmington Wild Wing Café Equipment Inventory

Public Storage 6441 Westgate Rd Unit # 723, # 725, # 731

Raleigh, NC 27617

	Description	Quantity	New Purchase Cost	Total	Current 50% Value
	DINING ROOM				
	DINING ROOM TABLES 4 TOP		\$ 427.88	\$ -	\$ -
	DINING ROOM TABLES 8 TOP	3	\$ 936.22	\$ 2,808.66	\$ 1,404.33
	DINING ROOM TABLE ROUND		\$ 635.19	\$ -	\$ -
	DINING ROOM BOOTHS 4 TOP	6	\$ 864.98	\$ 5,189.88	\$ 2,594.94
	DINING ROOM BOOTHS 6 TOP	3	\$ 667.89	\$ 2,003.67	\$ 1,001.84
	DINING ROOM CORNER BOOTHS	2	\$ 2,759.18	\$ 5,518.36	\$ 2,759.18
	MAHOGANY DINING ROOM CHAIRS	76	\$ 79.99	\$ 6,079.24	\$ 3,039.62
	BLACK METAL DINING ROOM CHAIRS		\$ 49.99	\$ -	\$ -
	MAHOGANY WOOD BARSTOOLS	81	\$ 119.99	\$ 9,719.19	\$ 4,859.60
	BLACK METAL BARSTOOLS		\$ 89.18	\$ -	\$ -
	HIGH TOP TABLES	13	\$ 481.33	\$ 6,257.29	\$ 3,128.65
	CUSTOM WING BAR		\$ 9,723.15	\$ -	\$ -
	PATIO TABLES		\$ 481.66	\$ -	\$ -
	PATIO CHAIRS		\$ 217.00	\$ -	\$ -
	ANIRONDACK CHAIRS		\$ 402.77	\$ -	\$ -
	FIRE PITS	1	\$ 335.00	\$ 335.00	\$ 167.50
	STAGE SOUND EQUIPMENT	1	\$ 27,350.00	\$ 27,350.00	\$ 13,675.00
	STEREO EQUIPMENT	1	\$ 6,500.00	\$ 6,500.00	\$ 3,250.00
	TV'S	12	\$ 417.22	\$ 5,006.64	\$ 2,503.32
	BAR EQUIPMENT				
	BAR WALK-IN COOLER		\$ 12,475.00	\$ -	\$ -
	TOP LOAD 2 DOOR		\$ 1,669.00	\$ -	\$ -
	TOP LOAD 3 DOOR		\$ 1,999.00	\$ -	\$ -
	FRONT LOAD 2 DOOR		\$ 1,789.00	\$ -	\$ -
	FRONT LOAD 3 DOOR		\$ 2,349.00	\$ -	\$ -
	MUG CHILLER SINGLE		\$ 1,289.00	\$ -	\$ -
	MUG CHILLER DOUBLE		\$ 3,471.00	\$ -	\$ -
	S/S BOTTLE WELL RACKS	1	\$ 435.00	\$ 435.00	\$ 217.50
	S/S ICE BINS	1	\$ 494.10	\$ 494.10	\$ 247.05
	S/S GLASS RACK HOLDERS	1	\$ 494.00	\$ 494.00	\$ 247.00
	KITCHEN				
	EPOXY WIRE SHELING W/ POSTS IN KITCHEN	9	\$ 365.00	\$ 3,285.00	\$ 1,642.50
	PREP WORK TABLE 30 X 96 INCH	2	\$ 1,730.00	\$ 3,460.00	\$ 1,730.00
	PREP WORK TABLE 30 X 84 INCH	1	\$ 1,487.00	\$ 1,487.00	\$ 743.50
	PREP WORK TABLE 30 X 72 INCH	1	\$ 1,137.15	\$ 1,137.15	\$ 568.58
	PREP WORK TABLE 30 X 48 INCH	2	\$ 988.65	\$ 1,977.30	\$ 988.65
	PREP WORK TABLE 30 X 36 INCH	1	\$ 932.40	\$ 932.40	\$ 466.20
	S/S 3-COMPARTMENT SINK W/ DRAINBOARDS		\$ 3,966.00	\$ -	\$ -
	S/S WALL SHELF 48" x 16"		\$ 285.00	\$ -	\$ -
	S/S WALL SHELF, 18" X 48"		\$ 315.00	\$ -	\$ -
	S/S WALL SHELF, 12" X 72"		\$ 423.00	\$ -	\$ -
	S/S WALL SHELF, 12" X 60"		\$ 373.16	\$ -	\$ -
	POT RACK	1	\$ 563.00	\$ 563.00	\$ 281.50
	BREAD / BUN RACKS	1	\$ 175.33	\$ 175.33	\$ 87.67
	WALK-IN COOLER BOX W/ LIGHTS		\$ 50,471.00	\$ -	\$ -
	WALK-IN FREEZER BOX W/ LIGHTS			\$ -	\$ -
	EPOXY WIRE SHELING W/ POSTS IN COOLER	8	\$ 365.00	\$ 2,920.00	\$ 1,460.00
	DUNNAGE RACK	6	\$ 85.00	\$ 510.00	\$ 255.00
	UPRIGHT COOLERS SINGLE DOOR	1	\$ 2,499.00	\$ 2,499.00	\$ 1,249.50
	UPRIGHT COOLER DBL DOOR		\$ 3,699.00	\$ -	\$ -
	UPRIGHT FREEZER SINGLE DOOR	1	\$ 2,687.15	\$ 2,687.15	\$ 1,343.58
	28" REFRIGERATED LINE COOLER		\$ 2,032.00	\$ -	\$ -
	36" REFRIGERATED LINE COOLER		\$ 2,040.99	\$ -	\$ -
	48" REFRIGERATED PREP TABLE	2	\$ 2,192.00	\$ 4,384.00	\$ 2,192.00
	60" REFRIGERATED PREP TABLE		\$ 2,615.17	\$ -	\$ -
	36" LINE FREEZER		\$ 2,233.41	\$ -	\$ -
	48" LINE FREEZER		\$ 2,551.16	\$ -	\$ -
	6 BURNER STOVE / OVEN	1	\$ 1,449.18	\$ 1,449.18	\$ 724.59

	4 BURNER STOVE		\$ 1,169.00	\$ -	\$ -
	4 BURNER EQUIPMENT STAND		\$ 325.00	\$ -	\$ -
	TURBOFAN	1	\$ 10,871.33	\$ 10,871.33	\$ 5,435.67
	CONVEYOR OVEN	1	\$ 35,450.00	\$ 35,450.00	\$ 17,725.00
	CHEESEMELTER		\$ 2,350.66	\$ -	\$ -
	S/S MICROWAVE SHELF, 24" W		\$ 447.22	\$ -	\$ -
	MICROWAVE	2	\$ 135.17	\$ 270.34	\$ 135.17
	FLAT TOP GRILL		\$ 2,149.33	\$ -	\$ -
	FLAT TOP GRILL 72"		\$ 3,155.23	\$ -	\$ -
	36" CHARBROILER		\$ 1,135.66	\$ -	\$ -
	72" REFRIGERATED EQUIPMENT STAND	1	\$ 7,561.00	\$ 7,561.00	\$ 3,780.50
	72" NON REFRIGERATED EQUIPMENT STAND		\$ 2,361.55	\$ -	\$ -
	GAS FRYERS		\$ 2,775.18	\$ -	\$ -
	TIMER	2	\$ 135.17	\$ 270.34	\$ 135.17
	SHORTENING CADDY		\$ 857.45	\$ -	\$ -
	HEATED HOLDING CABINET VERTICAL		\$ 2,699.33	\$ -	\$ -
	HEATED HOLDING / COOLER COMBO		\$ 7,615.22	\$ -	\$ -
	4 WELL HEATED STEAM TABLE		\$ 1,909.55	\$ -	\$ -
	DRAWER WARMER		\$ 1,317.22	\$ -	\$ -
	FOOD PAN WARMER	2	\$ 209.00	\$ 418.00	\$ 209.00
	SAUCE TABLE	1	\$ 4,035.61	\$ 4,035.61	\$ 2,017.81
	COUNTER TOP FRENCH FRY WARMER		\$ 1,337.00	\$ -	\$ -
	FRENCH FRY WARMER		\$ 583.00	\$ -	\$ -
	COOKLINE EXHAUST HOOD		\$ 28,247.99	\$ -	\$ -
	FIRE SYSTEM		\$ 6,542.11	\$ -	\$ -
	EXHAUST HOOD FAN		\$ 8,765.00	\$ -	\$ -
	ICE BIN		\$ 4,400.00	\$ -	\$ -
	ICE MACHINE		\$ 11,995.00	\$ -	\$ -
	WATER FILTRATION		\$ 840.00	\$ -	\$ -
	SMALLWARES	1	\$ 17,566.44	\$ 17,566.44	\$ 8,783.22
	ARTWORK	1	\$ 500.00	\$ 500.00	\$ 250.00
	OFFICE COMPUTER / PRINTER/ MONITOR	1	\$ 550.00	\$ 550.00	\$ 275.00
	OFFICE FURNITURE		\$ 650.00	\$ -	\$ -
	FILE CABINET	1	\$ 75.00	\$ 75.00	\$ 37.50
	SAFE	1	\$ 850.00	\$ 850.00	\$ 425.00
				\$ 146,164.31	\$ 73,082.16

Rock Hill Wild Wing Café Equipment Inventory
Public Storage Unit # I 54 / 9400 S Tryon
Extra Space Storage Unit # 115 & Unit # 613
10140 S Tryon both Charlotte NC, 28273

	Description	Quantity	New Purchase Cost	Total	Current 50% Value
	DINING ROOM				
	DINING ROOM TABLES 4 TOP	12	\$ 427.88	\$ 5,134.56	\$ 2,567.28
	DINING ROOM TABLES 6 TOP	2	\$ 845.16	\$ 1,690.32	\$ 845.16
	DINING ROOM TABLE ROUND	2	\$ 635.19	\$ 1,270.38	\$ 635.19
	DINING ROOM BOOTHS 4 TOP		\$ 864.98	\$ -	\$ -
	DINING ROOM BOOTHS 6 TOP		\$ 667.89	\$ -	\$ -
	DINING ROOM CORNER BOOTHS		\$ 2,759.18	\$ -	\$ -
	MAHOGANY DINING ROOM CHAIRS		\$ 79.99	\$ -	\$ -
	BLACK METAL DINING ROOM CHAIRS	40	\$ 49.99	\$ 1,999.60	\$ 999.80
	MAHOGANY WOOD BARSTOOLS		\$ 119.99	\$ -	\$ -
	BLACK METAL BARSTOOLS	66	\$ 89.18	\$ 5,885.88	\$ 2,942.94
	HIGH TOP TABLES	5	\$ 481.33	\$ 2,406.65	\$ 1,203.33
	CUSTOM WING BAR		\$ 9,723.15	\$ -	\$ -
	PATIO TABLES	1	\$ 481.66	\$ 481.66	\$ 240.83
	PATIO CHAIRS		\$ 217.00	\$ -	\$ -
	ANIRONDACK CHAIRS	5	\$ 402.77	\$ 2,013.85	\$ 1,006.93
	FIRE PITS		\$ 335.00	\$ -	\$ -
	UMBRELLAS	4	\$ 410.00	\$ 1,640.00	\$ 820.00
	STAGE SOUND EQUIPMENT	0.5	\$ 27,350.00	\$ 13,675.00	\$ 6,837.50
	STEREO EQUIPMENT	1	\$ 6,500.00	\$ 6,500.00	\$ 3,250.00
	TV'S	17	\$ 417.22	\$ 7,092.74	\$ 3,546.37
	BAR EQUIPMENT				
	BAR WALK-IN COOLER		\$ 12,475.00	\$ -	\$ -
	TOP LOAD 2 DOOR	1	\$ 1,669.00	\$ 1,669.00	\$ 834.50
	TOP LOAD 3 DOOR	1	\$ 1,999.00	\$ 1,999.00	\$ 999.50
	FRONT LOAD 2 DOOR		\$ 1,789.00	\$ -	\$ -
	FRONT LOAD 3 DOOR		\$ 2,349.00	\$ -	\$ -
	MUG CHILLER SINGLE	1	\$ 1,289.00	\$ 1,289.00	\$ 644.50
	MUG CHILLER DOUBLE		\$ 3,471.00	\$ -	\$ -
	S/S BOTTLE WELL RACKS	1	\$ 435.00	\$ 435.00	\$ 217.50
	S/S ICE BINS	1	\$ 494.10	\$ 494.10	\$ 247.05
	S/S GLASS RACK HOLDERS	1	\$ 494.00	\$ 494.00	\$ 247.00
	KITCHEN				
	EPOXY WIRE SHELVEING W/ POSTS IN KITCHEN	10	\$ 365.00	\$ 3,650.00	\$ 1,825.00
	PREP WORK TABLE 30 X 96 INCH	1	\$ 1,730.00	\$ 1,730.00	\$ 865.00
	PREP WORK TABLE 30 X 84 INCH	1	\$ 1,487.00	\$ 1,487.00	\$ 743.50
	PREP WORK TABLE 30 X 72 INCH	2	\$ 1,137.15	\$ 2,274.30	\$ 1,137.15
	PREP WORK TABLE 30 X 48 INCH	2	\$ 988.65	\$ 1,977.30	\$ 988.65
	PREP WORK TABLE 30 X 36 INCH	2	\$ 932.40	\$ 1,864.80	\$ 932.40
	S/S 3-COMPARTMENT SINK W/ DRAINBOARDS		\$ 3,966.00	\$ -	\$ -
	S/S WALL SHELF 48" x 16"		\$ 285.00	\$ -	\$ -
	S/S WALL SHELF, 18" X 48"		\$ 315.00	\$ -	\$ -
	S/S WALL SHELF, 12" X 72"	2	\$ 423.00	\$ 846.00	\$ 423.00
	S/S WALL SHELF, 12" X 60"		\$ 373.16	\$ -	\$ -
	POT RACK	1	\$ 563.00	\$ 563.00	\$ 281.50
	BREAD / BUN RACKS	2	\$ 175.33	\$ 350.66	\$ 175.33
	WALK-IN COOLER BOX W/ LIGHTS		\$ 50,471.00	\$ -	\$ -
	WALK-IN FREEZER BOX W/ LIGHTS			\$ -	\$ -
	EPOXY WIRE SHELVEING W/ POSTS IN COOLER	4	\$ 365.00	\$ 1,460.00	\$ 730.00
	DUNNAGE RACK	4	\$ 85.00	\$ 340.00	\$ 170.00
					\$ -
	UPRIGHT COOLERS SINGLE DOOR	1	\$ 2,499.00	\$ 2,499.00	\$ 1,249.50
	UPRIGHT COOLER DBL DOOR	1	\$ 3,699.00	\$ 3,699.00	\$ 1,849.50
	UPRIGHT FREEZER SINGLE DOOR	1	\$ 2,687.15	\$ 2,687.15	\$ 1,343.58
	28" REFRIGERATED LINE COOLER		\$ 2,032.00	\$ -	\$ -
	36" REFRIGERATED LINE COOLER	1	\$ 2,040.99	\$ 2,040.99	\$ 1,020.50
	48" REFRIGERATED PREP TABLE	1	\$ 2,192.00	\$ 2,192.00	\$ 1,096.00
	60" REFRIGERATED PREP TABLE	2	\$ 2,615.17	\$ 5,230.34	\$ 2,615.17
	36" LINE FREEZER		\$ 2,233.41	\$ -	\$ -

	48" LINE FREEZER		\$ 2,551.16	\$ -	\$ -
					\$ -
	4 BURNER STOVE / OVEN		\$ 1,449.18	\$ -	\$ -
	4 BURNER STOVE	1	\$ 1,169.00	\$ 1,169.00	\$ 584.50
	4 BURNER EQUIPMENT STAND	1	\$ 325.00	\$ 325.00	\$ 162.50
	BLODGETT OVEN		\$ 15,557.31	\$ -	\$ -
	CONVEYOR OVEN	1	\$ 35,450.00	\$ 35,450.00	\$ 17,725.00
	GRILL CONVEYOR OVEN	1	\$ 8,500.00	\$ 8,500.00	\$ 4,250.00
	CHEESEMELTER		\$ 2,350.66	\$ -	\$ -
	S/S MICROWAVE SHELF, 24" W		\$ 447.22	\$ -	\$ -
	MICROWAVE	1	\$ 135.17	\$ 135.17	\$ 67.59
	FLAT TOP GRILL		\$ 2,149.33	\$ -	\$ -
	FLAT TOP GRILL 72"		\$ 3,155.23	\$ -	\$ -
	36" CHARBROILER		\$ 1,135.66	\$ -	\$ -
	72" REFRIGERATED EQUIPMENT STAND		\$ 7,561.00	\$ -	\$ -
	72" NON REFRIGERATED EQUIPMENT STAND		\$ 2,361.55	\$ -	\$ -
	GAS FRYERS	6	\$ 2,775.18	\$ 16,651.08	\$ 8,325.54
	TIMER		\$ 135.17	\$ -	\$ -
	SHORTENING CADDY	1	\$ 857.45	\$ 857.45	\$ 428.73
	HEATED HOLDING CABINET VERTICAL		\$ 2,699.33	\$ -	\$ -
	HEATED HOLDING / COOLER COMBO		\$ 7,615.22	\$ -	\$ -
	4 WELL HEATED STEAM TABLE	1	\$ 1,909.55	\$ 1,909.55	\$ 954.78
	DRAWER WARMER		\$ 1,317.22	\$ -	\$ -
	FOOD PAN WARMER		\$ 209.00	\$ -	\$ -
	SAUCE TABLE	1	\$ 4,035.61	\$ 4,035.61	\$ 2,017.81
	COUNTER TOP FRENCH FRY WARMER	1	\$ 1,337.00	\$ 1,337.00	\$ 668.50
	FRENCH FRY WARMER	1	\$ 583.00	\$ 583.00	\$ 291.50
	COOKLINE EXHAUST HOOD		\$ 28,247.99	\$ -	\$ -
	FIRE SYSTEM		\$ 6,542.11	\$ -	\$ -
	EXHAUST HOOD FAN		\$ 8,765.00	\$ -	\$ -
	ICE BIN		\$ 4,400.00	\$ -	\$ -
	ICE MACHINE		\$ 11,995.00	\$ -	\$ -
	WATER FILTRATION		\$ 840.00	\$ -	\$ -
	SMALLWARES	1	\$ 17,566.44	\$ 17,566.44	\$ 8,783.22
	OFFICE COMPUTER / PRINTE / MONITOR	1	\$ 550.00	\$ 550.00	\$ 275.00
	OFFICE FURNITURE		\$ 650.00	\$ -	\$ -
	FILE CABINET	2	\$ 75.00	\$ 150.00	\$ 75.00
				\$ 159,398.68	\$ 79,699.34

Fill in this information to identify the case:

Debtor name **Aetius Restaurant Holdings, LLC**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) **23-30474**

☒ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount	
2.1	<p>Priority creditor's name and mailing address</p> <p>Aiken County Treasurer PO Box 919 Aiken, SC 29802</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$10,783.98	Unknown
2.2	<p>Priority creditor's name and mailing address</p> <p>Anderson County Treasurer PO Box 1658 Anderson, SC 29622</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$54,921.77	Unknown

Debtor	Aetius Restaurant Holdings, LLC	Case number (if known)	23-30474
2.3	Priority creditor's name and mailing address Beaufort County Treasurer's Office PO BOX 105176, Drawer 1228 Atlanta, GA 30348-5176	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$199,565.97 Unknown
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.4	Priority creditor's name and mailing address Charleston County Revenue Collections 4045 Bridge View Drive, #B110 North Charleston, SC 29405	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$27,759.10 Unknown
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.5	Priority creditor's name and mailing address City of Aiken PO Box 2458 Aiken, SC 29802	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$8,844.83 Unknown
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.6	Priority creditor's name and mailing address City of Columbia Business License Division PO Box 7997 Columbia, SC 29201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$31,590.58 Unknown
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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2.7	Priority creditor's name and mailing address City of Greenville Business License-Revenue Department PO Box 2207 Greenville, SC 29601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$43,046.29	Unknown
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address City of Raleigh PO BOX 71081 Charlotte, NC 28272-1081	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$13,018.67	Unknown
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address City of Savannah PO Box 1027 2 East Bay Street Savannah, GA 31401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$71,340.55	Unknown
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address City of Wilmington PO Box 81010 Wilmington, NC 28402	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$265.00	Unknown
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Aetius Restaurant Holdings, LLC**
Name

Case number (if known)

23-30474

2.11	Priority creditor's name and mailing address City-County Tax Collector PO Box 32728 Charlotte, NC 28232-2728	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$10,488.70	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.12	Priority creditor's name and mailing address Dekalb County Tax Commissioner PO Box 100004 Decatur, GA 30031-7004	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,470.68	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.13	Priority creditor's name and mailing address Duval County Tax Collector PO Box 44009 Jacksonville, FL 32231-4009	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,957.88	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.14	Priority creditor's name and mailing address FL Department of Revenue P.O. Box 7443 Tallahassee, FL 32314-7443	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$44,905.90	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Aetius Restaurant Holdings, LLC**
Name

Case number (if known)

23-30474

2.15	Priority creditor's name and mailing address Gaston County Tax Office 128 W. Main Ave. Gastonia, NC 28052	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$9,025.99	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.16	Priority creditor's name and mailing address Georgia Department of Revenue Taxpayer Services Division PO BOX 105499 Atlanta, GA 30348-5499	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$53,336.12	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.17	Priority creditor's name and mailing address Greenville County Tax Collector 301 University Ridge, Ste 700 Greenville, SC 29601-3659	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$45,501.01	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.18	Priority creditor's name and mailing address Internal Revenue Service PO Box 9941 STOP 5500 Ogden, UT 84409	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$261,793.48	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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2.19	Priority creditor's name and mailing address Lexington County Treasurer's Office 212 S Lake Dr Lexington, SC 29072	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$9,448.04	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.20	Priority creditor's name and mailing address Mecklenburg County Tax Collector PO Box 71063 Charlotte, NC 28272-1063	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,034.76	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.21	Priority creditor's name and mailing address NC Department of Revenue PO Box 25000 Raleigh, NC 27640	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$280,133.02	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.22	Priority creditor's name and mailing address New Hanover County Tax Office PO Box 18000 Wilmington, NC 28406	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$13,624.27	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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2.23	Priority creditor's name and mailing address Richland County Taxes PO Box 11947 Columbia, SC 29211	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,381.58	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.24	Priority creditor's name and mailing address Richland County Treasurer PO Box 11947 Columbia, SC 29211	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$29,918.60	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.25	Priority creditor's name and mailing address SC Department of Revenue ATTN: ACS COLLECTIONS 300A Outlet Pointe Blvd. Columbia, SC 29210	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$222,666.65	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.26	Priority creditor's name and mailing address Spartanburg County Tax Collector PO Box 3060 Spartanburg, SC 29304-3060	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$31,578.90	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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2.27	Priority creditor's name and mailing address United States Treasury Internal Revenue Service PO Box 267, Stop 812 Covington, KY 41019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,670.00	Unknown
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Date or dates debt was incurred	Basis for the claim:
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Last 4 digits of account number	Is the claim subject to offset?
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Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

☒ No
☐ Yes

2.28	Priority creditor's name and mailing address Wake County Revenue Department Prepared Food and Beverage Division PO Box 2719 Raleigh, NC 27602-2719	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$13,711.58	Unknown
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Date or dates debt was incurred	Basis for the claim:
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Last 4 digits of account number	Is the claim subject to offset?
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Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

☒ No
☐ Yes

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			Amount of claim	
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3.1	Nonpriority creditor's name and mailing address 1 Call Plumbing, Inc. 7407 Reedy Creek Rd Charlotte, NC 28215 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$910.00	
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3.2	Nonpriority creditor's name and mailing address 1188 Centre HPR C/O IMC Resort Services Inc PO Box 95187 Las Vegas, NV 89133 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,640.00	
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3.3	Nonpriority creditor's name and mailing address 485 MEDIA, LLC 10612 D Providence Rd # 716 Charlotte, NC 28277 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$359.29	
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.4	Nonpriority creditor's name and mailing address A & A Refrigeration LLC 110 Cherry Hill Avenue Goose Creek, SC 29445 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,769.59
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3.5	Nonpriority creditor's name and mailing address A Perfect Pressure Cleaning, Inc. Pedro Abdiel Diaz, Registered Agent 217 DAVENTON RD Pelzer, SC 29669 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$550.00
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3.6	Nonpriority creditor's name and mailing address A S Private Security LLC 17 Beacon Lane Port Wentworth, GA 31407 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,585.38
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3.7	Nonpriority creditor's name and mailing address AARK Hospitality TK, Inc. 6 Red Gravel Circle Sicklerville, NJ 08081 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.8	Nonpriority creditor's name and mailing address ACR Master Locksmith LLC 7804 Fairview Road, #342 Charlotte, NC 28226 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160.00
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3.9	Nonpriority creditor's name and mailing address Action Graphics and Signs Inc 112 Wayne Avenue Chesapeake, VA 23320 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,038.80
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3.10	Nonpriority creditor's name and mailing address ADP SCREENING & SELECTION SERVICES 301 Remington Street Fort Collins, CO 80524 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$80,744.87
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.11	Nonpriority creditor's name and mailing address ADP, Inc. One ADP Boulevard Roseland, NJ 07068 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$80,810.00
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3.12	Nonpriority creditor's name and mailing address Advanced Disposal PO Box 74008047 Chicago, IL 60674-8047 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,124.19
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3.13	Nonpriority creditor's name and mailing address Agency Zero LLC 24657 Foothills Drive N Golden, CO 80401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,200.00
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3.14	Nonpriority creditor's name and mailing address Airgas National Carbonation 3101 Stafford Dr Charlotte, NC 28208 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,565.94
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3.15	Nonpriority creditor's name and mailing address AIRGAS USA, LLC PO Box 9249 Marietta, GA 30065-2249 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,242.59
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3.16	Nonpriority creditor's name and mailing address Alarm, Fire & Security, LLC PO Box 2072 Hilton Head Island, SC 29910-2072 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$843.00
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3.17	Nonpriority creditor's name and mailing address Alcohol Beverage Logistical Service, LLC 2822 Liatris Lane Charlotte, NC 28213 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,603.11
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.18	Nonpriority creditor's name and mailing address Altus Receivables Management 2121 Airline Dr, Suite 250 Metairie, LA 70001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$41,951.83
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3.19	Nonpriority creditor's name and mailing address Ambos Seafoods LLC PO Box 15242 Savannah, GA 31401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$55,776.05
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3.20	Nonpriority creditor's name and mailing address America's Favorite Wing Caf c/o Kim and Lahey Law Firm LLC 3620 Pelham Road, PMB #213 Greenville, SC 29615 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.21	Nonpriority creditor's name and mailing address American Express P.O. Box 981535 El Paso, TX 79998-1535 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,940.00
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3.22	Nonpriority creditor's name and mailing address Andrea Campoli Rocket Entertainment & Music Booking 7267 Sandy Creek Drive Raleigh, NC 27615 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,150.00
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3.23	Nonpriority creditor's name and mailing address ARC NWNCHSC0001 LLC c/o Corportion Service Company 508 Meeting Street West Columbia, SC 29169 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,756.92
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3.24	Nonpriority creditor's name and mailing address Armstrong Transfer & Storage Co Inc 4400 Westinghouse Blvd Charlotte, NC 28273 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,784.42
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.25	Nonpriority creditor's name and mailing address ARS Rescue Rooter 2548 Oscar Johnson Drive N. Charleston, SC 29405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,477.00
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3.26	Nonpriority creditor's name and mailing address ASC LLC 8151 Webbs Road Denver, NC 28037 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,045.53
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3.27	Nonpriority creditor's name and mailing address ASCAP Attn: Account Services PO BOX 331608 Nashville, TN 37203-7515 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$145,208.28
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3.28	Nonpriority creditor's name and mailing address AT&T PO Box 105262 Atlanta, GA 30348-5262 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$232.72
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3.29	Nonpriority creditor's name and mailing address ATIS Elevator Inspections LLC PO Box 790379 St. Louis, MO 63179-0379 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$146.13
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3.30	Nonpriority creditor's name and mailing address Authentic Elite Power Wash 2631 Rufus Ratchford Rd Gastonia, NC 28056 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,115.00
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3.31	Nonpriority creditor's name and mailing address AW Billing Services LLC 4431 North Dixie Highway Boca Raton, FL 33431 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,109.42
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.32	Nonpriority creditor's name and mailing address BACKFLOW PREVENTION PO Box 667 McDonough, GA 30253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$255.00
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3.33	Nonpriority creditor's name and mailing address Barmalade LLC 190 E. Stacy Road Suite 306 Allen, TX 75002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$931.50
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3.34	Nonpriority creditor's name and mailing address BCBS Management Inc Supporting Strategies Charlotte 2405 Gateway Ln Lincolnton, NC 28092 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,707.30
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3.35	Nonpriority creditor's name and mailing address BCN Telecom Inc PO Box 842840 Boston, MA 02284 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,735.00
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3.36	Nonpriority creditor's name and mailing address BEAT THE HEAT 7912 OLDE POND RD Wilmington, NC 28411 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,617.44
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3.37	Nonpriority creditor's name and mailing address Beaufort Design Build LLC 2 Fire Station Lane Seabrook, SC 29940 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,525.00
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3.38	Nonpriority creditor's name and mailing address BeerBoard US Beverage Net, Inc. 225 W Jefferson St Syracuse, NY 13202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,616.13
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.39	Nonpriority creditor's name and mailing address Belmont Fire & Safety Products, LLC PO Box 928 Belmont, NC 28012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,001.85
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3.40	Nonpriority creditor's name and mailing address Best There Is/Scot Mann 1274 Old Kimbill Trail Aiken, SC 29805 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,038.00
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3.41	Nonpriority creditor's name and mailing address Beverage Control Inc 5215 South Royal Atlanta Drive Tucker, GA 30084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$543.25
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3.42	Nonpriority creditor's name and mailing address Bigart Ecosystems LLC (Wisetail) 5301 Riata Park Court F Austin, TX 78727 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,720.00
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3.43	Nonpriority creditor's name and mailing address BJWSA PO Box 602919 Charlotte, NC 28260 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,505.69
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3.44	Nonpriority creditor's name and mailing address Black Box Intelligence c/o TDn2K, LLC 14785 Preston Rd #290 Dallas, TX 75254 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,800.00
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3.45	Nonpriority creditor's name and mailing address Blair Elementary PTA 6510 Market Street Wilmington, NC 28405 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$290.00
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.46	Nonpriority creditor's name and mailing address Blanchard Refrigeration Contractors Inc DBA Rich's Heating & Air Conditioning 109 W Church Street Rose Hill, NC 28458 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,071.86
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3.47	Nonpriority creditor's name and mailing address Blossman Gas & Appliance 6109 Wilkinson Blvd Belmont, NC 28012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$678.29
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3.48	Nonpriority creditor's name and mailing address BLUFFTON ELECTRIC 266 RED CEDAR STREET Bluffton, SC 29910 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,955.00
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3.49	Nonpriority creditor's name and mailing address BMI - Broadcast Music Inc 7 World Trade Center 250 Greenwich Street New York, NY 10007-0030 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$128,362.85
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3.50	Nonpriority creditor's name and mailing address Bonnie Hutchison Tri-State Plumbing & Electrical 505 Poinsett Hwy Greenville, SC 29609 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,605.00
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3.51	Nonpriority creditor's name and mailing address Brian Peck 18 Gladesworth Dr Greenville, SC 29615 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
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3.52	Nonpriority creditor's name and mailing address Brian Watts 9109 Marion Oaks Dr Charlotte, NC 28215 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.53	Nonpriority creditor's name and mailing address Brier Creek LP Attn: Craig Farkas 1900 Avenue of the Stars, Suite 2400 Los Angeles, CA 90067 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,017.19
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3.54	Nonpriority creditor's name and mailing address Brinks Incorporated 7373 Solutions CTR. Chicago, IL 60677-7003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,843.80
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3.55	Nonpriority creditor's name and mailing address Brooke R. Ashman 615 Red Cross St Apt A Wilmington, NC 28401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.00
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3.56	Nonpriority creditor's name and mailing address Butch Johnston 1041 Willow Grove Ln York, SC 29745 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.00
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3.57	Nonpriority creditor's name and mailing address C.E. Holt Refrigeration 3316 Gibbon Rd Charlotte, NC 28269 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$256.50
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3.58	Nonpriority creditor's name and mailing address Cape Fear Commercial 102 Autumn Hall Drive Suite 210 Wilmington, NC 28403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,082.70
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3.59	Nonpriority creditor's name and mailing address Cape Fear Public Utility Authority 235 Government Center Drive Wilmington, NC 28403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,330.89
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.60	Nonpriority creditor's name and mailing address Capital Waste Services PO Box 148 Columbia, SC 29202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,538.00
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3.61	Nonpriority creditor's name and mailing address Capitol Coffee Systems 1113 Capital Blvd Raleigh, NC 27603 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,780.14
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3.62	Nonpriority creditor's name and mailing address Card Marketing Services Ilc 2026 Johnson Industrial Blvd Nolensville, TN 37135 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,531.00
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3.63	Nonpriority creditor's name and mailing address Cardlytics 75 Remittance Drive Dept 3247 Chicago, IL 60675-3247 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,061.51
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3.64	Nonpriority creditor's name and mailing address Carlos Odell Scott 2812 College Farm Rd Moorestown, NC 28114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$900.00
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3.65	Nonpriority creditor's name and mailing address Carolina Hotwash PO Box 81001 Charleston, SC 29416 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,600.00
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3.66	Nonpriority creditor's name and mailing address CBG Draft Services NC LLC 1720 Toal St Charlotte, NC 28206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,840.03
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.67	Nonpriority creditor's name and mailing address CC Landfall LLC 1111 Metropolitan Avenue Suite 700 Charlotte, NC 28204 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,794.93
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3.68	Nonpriority creditor's name and mailing address Charleston Water Systems PO Box 568 Charleston, SC 29402-0568 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,936.36
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3.69	Nonpriority creditor's name and mailing address Charlotte Alarm PO Box 602486 Charlotte, NC 28260-2486 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,600.00
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3.70	Nonpriority creditor's name and mailing address Charlotte IT Solutions PO Box 31066 Charlotte, NC 28231-1066 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,943.87
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3.71	Nonpriority creditor's name and mailing address Charlotte Knights 324 S. MINT STREET Charlotte, NC 28202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00
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3.72	Nonpriority creditor's name and mailing address Charter Communications PO Box 6030 Carol Stream, IL 60197-6030 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,520.67
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3.73	Nonpriority creditor's name and mailing address Chatham County Health Department PO Box 14257 Savannah, GA 31416 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.74	Nonpriority creditor's name and mailing address CHATMETER INC PO BOX 675307 Detroit, MI 48267-5307 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,368.00
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3.75	Nonpriority creditor's name and mailing address Christine Harder 201 Lakeshore Drive Gaffney, SC 29341 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$699.87
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3.76	Nonpriority creditor's name and mailing address Christopher Baxter PO Box 872 Lowell, NC 28098 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$875.00
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3.77	Nonpriority creditor's name and mailing address Chuck Eaton Photographers 210 Park Square Place Matthews, NC 28105 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$536.25
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3.78	Nonpriority creditor's name and mailing address CIGNA HealthCare 5476 Collections Center Dr Chicago, IL 60693-0547 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$747,714.71
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3.79	Nonpriority creditor's name and mailing address Cintas Corporation 6800 Cintas Blvd Cincinnati, OH 45262 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,135.54
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3.80	Nonpriority creditor's name and mailing address Cintas Corporation No. 2 PO Box 21029 Winston Salem, NC 27120 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.81	Nonpriority creditor's name and mailing address Cintas Fire 636525 PO Box 636525 Cincinnati, OH 45263-6525 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,024.06
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3.82	Nonpriority creditor's name and mailing address City Electric Supply Co PO Box 131811 Dallas, TX 75313-1811 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,401.81
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3.83	Nonpriority creditor's name and mailing address City of Charlotte (Water) Billing Center PO Box 1316 Charlotte, NC 28201 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,075.84
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3.84	Nonpriority creditor's name and mailing address City of Dunwoody 4800 Ashford Dunwoody Road Atlanta, GA 30338 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$544.05
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3.85	Nonpriority creditor's name and mailing address City of Gastonia Utilities PO Box 580068 Charlotte, NC 28258-0068 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,713.93
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3.86	Nonpriority creditor's name and mailing address City of Rock Hill-Utilities PO Box 63039 Charlotte, NC 28263-3039 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,763.66
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3.87	Nonpriority creditor's name and mailing address City Wide Exterminating 907 West Main Street Locust, NC 28097 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$230.00
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.88	Nonpriority creditor's name and mailing address Classic Vinyl Repair Inc. 419 N. College Rd. Wilmington, NC 28405 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,337.95
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3.89	Nonpriority creditor's name and mailing address CLEAN FLO SEWER AND DRAIN 100 CONSTRUCTION WAY Unit 7 Anderson, SC 29625 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,350.00
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3.90	Nonpriority creditor's name and mailing address Coastal Empire Fire & Security Corp 2431 Habersham St. Savannah, GA 31401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,981.92
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3.91	Nonpriority creditor's name and mailing address Coca-Cola North America PO Box 102703 Atlanta, GA 30368-2703 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18.46
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3.92	Nonpriority creditor's name and mailing address Comcast Cable PO Box 71211 Charlotte, NC 73736-7728 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,985.42
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3.93	Nonpriority creditor's name and mailing address COMMERCIAL DOOR WORX INC 227 W 4th St Charlotte, NC 28202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,330.00
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3.94	Nonpriority creditor's name and mailing address Commercial Refrigeration Company INC 1133 Commercial Ave Charlotte, NC 28205 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$329.54
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.95	Nonpriority creditor's name and mailing address Compeat Restaurant Mgmt Systems Corp 11500 Alterra Parkway, Ste 130 Austin, TX 75758 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$48,291.27
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3.96	Nonpriority creditor's name and mailing address Complete Pymt Recovery PO BOX 30184 Tampa, FL 33630-3184 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,313.63
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3.97	Nonpriority creditor's name and mailing address Comporium PO Box 1042 Rock Hill, SC 29731-7042 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,871.16
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3.98	Nonpriority creditor's name and mailing address Corley Plumbing Air Electric 8501 Pelham Road. Greenville, SC 29615 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,169.30
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3.99	Nonpriority creditor's name and mailing address Corporate Pride LLC 1809 E Broadway St Oviedo, FL 32765 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,808.03
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3.100	Nonpriority creditor's name and mailing address Corporate Services Consultants, LLC PO BOX 1048 Dandridge, TN 37725 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,777.50
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3.101	Nonpriority creditor's name and mailing address Courtyard By Marriot Atlanta McDonough 115 Mill Road McDonough, GA 30253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,119.05
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.102	Nonpriority creditor's name and mailing address Cozzini Bros., Inc. 350 Howard Ave. Des Plaines, IL 60018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$371.50
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3.103	Nonpriority creditor's name and mailing address CPI Security Systems Inc. 4200 Sandy Porter Road Charlotte, NC 28273 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,146.13
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3.104	Nonpriority creditor's name and mailing address CSC Global PO BOX 7410023 Chicago, IL 60674-5023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
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3.105	Nonpriority creditor's name and mailing address CT Corporation PO Box 4349 Carol Stream, IL 60197-4349 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,888.43
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3.106	Nonpriority creditor's name and mailing address DALE HARRIS GASKET GUY 1608 N. WOODSTREAM RD Columbia, SC 29212 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$732.90
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3.107	Nonpriority creditor's name and mailing address Dallas R. Courtney Jr. 1218 13th Ave. NE Hickory, NC 28601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,700.00
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3.108	Nonpriority creditor's name and mailing address DAVID JENNINGS 4107 Kettering Dr Durham, NC 27713 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,050.00
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.109	Nonpriority creditor's name and mailing address David Matthew Vaine 14 Carmel Dr Statesboro, GA 30458 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,534.00
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3.110	Nonpriority creditor's name and mailing address De Lage Landen Financial Services Inc PO BOX 41602 Philadelphia, PA 19101-1602 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,867.71
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3.111	Nonpriority creditor's name and mailing address Deerwood Park North Owners Association c/o Gerald Dake & Associates 13617 Atlantic Blvd Jacksonville, FL 32225 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,121.71
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3.112	Nonpriority creditor's name and mailing address Dekalb Enviromental Health 445 Winn Way, Suite 320 Decatur, GA 30030 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$759.00
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3.113	Nonpriority creditor's name and mailing address Demitri's Gourmet Mixes Inc PO Box 84123 Seattle, WA 98124 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$736.25
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3.114	Nonpriority creditor's name and mailing address Department of the Navy 9053 First St, Suite 100 Norfolk, VA 23511-3605 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,000.00
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3.115	Nonpriority creditor's name and mailing address DESOTO PROPERTIES, LLC 400 Mall Blvd, Suite M Savannah, GA 31406 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$217.50
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.116	Nonpriority creditor's name and mailing address Destini Brown 330 Gatesbrook Dr Blythewood, SC 29016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$540.70
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3.117	Nonpriority creditor's name and mailing address Devin Anthony Greenhill 104 Teal Ct Summerville, SC 29483 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.00
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3.118	Nonpriority creditor's name and mailing address Devon Kendall 265 Legacy Dr Youngsville, NC 27596 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$164.59
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3.119	Nonpriority creditor's name and mailing address Dhanraj N Emanuel 8 Dundas Circle Suite F Greensboro, NC 27407 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,810.38
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3.120	Nonpriority creditor's name and mailing address Dilworth Paxson LLP 1500 Market St. Suite 3500E Philadelphia, PA 19102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,732.25
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3.121	Nonpriority creditor's name and mailing address Direct Connect Plumbing LLC 4363 Shallowford Industrial Pkwy Ste A Marietta, GA 30066 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,197.50
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3.122	Nonpriority creditor's name and mailing address Direct TV PO Box 105249 Atlanta, GA 30348-5249 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$368,230.03
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.123	Nonpriority creditor's name and mailing address Dixie Lock & Safe of Aiken 1006 Owens St Aiken, SC 29803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$903.20
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3.124	Nonpriority creditor's name and mailing address Dominion Energy PO Box 100255 Columbia, SC 29202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,627.94
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3.125	Nonpriority creditor's name and mailing address DOOR MEDIC PO BOX 1642 Belmont, NC 28012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$324.92
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3.126	Nonpriority creditor's name and mailing address DOVE ELECTRICAL SERVICES INC. PO BOX 19424 Charlotte, NC 28219-9424 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$312.80
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3.127	Nonpriority creditor's name and mailing address Drury Inn & Suites CLT Arrowood 8925 Red Oak Blvd Charlotte, NC 28217 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,224.48
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3.128	Nonpriority creditor's name and mailing address Duane L. Huffman c/o William Walker 212 North Laura Street Jacksonville, FL 32202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.129	Nonpriority creditor's name and mailing address Dumpster Depot 262 Eastgate Drive, Suite 336 Aiken, SC 29803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,320.80
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.130	Nonpriority creditor's name and mailing address East Coast Solutions LLC 18357 Seven Creeks Highway Tabor City, NC 28463 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$353.04
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3.131	Nonpriority creditor's name and mailing address Ecolab Ecosure 26397 Network Place Chicago, IL 60673-1263 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,630.07
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3.132	Nonpriority creditor's name and mailing address Ecolab Pest Elimination Inc. 26252 Network Place Chicago, IL 60673-1262 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,276.86
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3.133	Nonpriority creditor's name and mailing address Ecolab, Inc. PO Box 32027 New York, NY 10087-2027 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,068.29
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3.134	Nonpriority creditor's name and mailing address Edge Air Conditioning Corp PO Box 80 Pooler, GA 31322 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,629.32
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3.135	Nonpriority creditor's name and mailing address EEC Acquisition LLC Smart Care Equipment Solutions PO Box 74008980 Chicago, IL 60674 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,289.77
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3.136	Nonpriority creditor's name and mailing address Emma Bolen 902 JASMINE COVE CIRCLE Simpsonville, SC 29680 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$432.40
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.137	Nonpriority creditor's name and mailing address Environmental Remedies LLC 452 Sawtell Ave SE Atlanta, GA 30315 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,845.00
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3.138	Nonpriority creditor's name and mailing address Eplee & Associates Directories LLC PO BOX 27045 Greenville, SC 29616 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$275.00
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3.139	Nonpriority creditor's name and mailing address eSite Analytics Inc. 528 Johnnie Dodds Blvd, Suite 201 Mt Pleasant, SC 29464 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,166.68
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3.140	Nonpriority creditor's name and mailing address Factory Cleaning Equipment Inc 1578 Beverly Court Ste A Aurora, IL 60502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,092.97
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3.141	Nonpriority creditor's name and mailing address FAST LOCKSMITH CHARLESTON 215 Promenade Vista Street #3056 Charleston, SC 29412 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$690.00
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3.142	Nonpriority creditor's name and mailing address Fintech 7702 WOODLAND CENTER BLVD STE. 50 Tampa, FL 33614 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,597.28
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3.143	Nonpriority creditor's name and mailing address Fire Tech of the Lowcountry, LLC Thomas Fabian Cambron Jr 23 Martingale W Bluffton, SC 29910 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,602.38
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.144	Nonpriority creditor's name and mailing address FIRST STOP HEALTH, LLC 233 NORTH MICHIGAN AVE, UNIT 1400 Chicago, IL 60601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,501.20
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3.145	Nonpriority creditor's name and mailing address FIS Global / WorldPay 347 Riverside Avenue Jacksonville, FL 32202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92,204.00
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3.146	Nonpriority creditor's name and mailing address Fish Window Cleaning 2735 Old Atlanta Rd, Ste E PO BOX 171 Griffin, GA 30223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,361.00
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3.147	Nonpriority creditor's name and mailing address FLAME ON COOL OFF (FOCO), LLC PO BOX 25854 Raleigh, NC 27611-5854 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,781.40
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3.148	Nonpriority creditor's name and mailing address Flour-Town Holdings LLC 92 Chadwick Street Charleston, SC 29407 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,545.85
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3.149	Nonpriority creditor's name and mailing address FOH AND BOH INC 3802 Woodmont Ln Nashville, TN 37215 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,100.00
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3.150	Nonpriority creditor's name and mailing address Freedom Plumbing INC 5569 Platt Springs Rd Lexington, SC 29073 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,632.00
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.151	Nonpriority creditor's name and mailing address Frontline Insurance PO Box 958405 Lake Mary, FL 32795-8405 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$837.71
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3.152	Nonpriority creditor's name and mailing address Fusion Systems LLC 119 N MARKLEY ST Greenville, SC 29601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$540.00
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3.153	Nonpriority creditor's name and mailing address FuturePlan by Ascensus 200 Dryden Road, Suite 4000 Dresher, PA 19025 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,280.00
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3.154	Nonpriority creditor's name and mailing address GALVEZ PAINTING AND REMODELING LLC 98 UNION CEMETERY RD Hilton Head, SC 29926 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,575.00
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3.155	Nonpriority creditor's name and mailing address GAR Products 430 Oberlin Ave. S. Lakewood, NJ 08701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$282.86
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3.156	Nonpriority creditor's name and mailing address Garrett Huffman 2525 Cypress Oak Ln Gastonia, NC 28056 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.00
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3.157	Nonpriority creditor's name and mailing address Gars Incorporated 50 Grayson Industrial Pkwy Grayson, GA 30017 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,618.80
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.158	Nonpriority creditor's name and mailing address Gas South PO BOX 530552 Atlanta, GA 30353-0552 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,832.59
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3.159	Nonpriority creditor's name and mailing address Gasket Guy of Charlotte (S-Corp) 10106 Sardis Oaks Rd Charlotte, NC 28270 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,269.06
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3.160	Nonpriority creditor's name and mailing address Genovese Joblove & Battista 100 Southeast Second St 44th Floor Miami, FL 33131 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$43,175.48
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3.161	Nonpriority creditor's name and mailing address Georgia Air & Refrigeration, Inc. c/o Andrew J. Becker 5775 North Point Pkwy., Ste. 284 Alpharetta, GA 30022 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.162	Nonpriority creditor's name and mailing address Georgia Power 96 Annex Atlanta, GA 30396 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$42,074.16
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3.163	Nonpriority creditor's name and mailing address GFL Enviromental Corp PO Box 791519 Baltimore, MD 21279-1519 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,285.11
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3.164	Nonpriority creditor's name and mailing address Google 1600 Amphitheatre Parkway Mountain View, CA 94043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,778.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.165	Nonpriority creditor's name and mailing address Great America Financial Services Corp PO Box 660831 Dallas, TX 75266 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,500.29
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3.166	Nonpriority creditor's name and mailing address GREATER CHARLOTTE REFRGERATION 6120-J Brookshire Blvd. Charlotte, NC 28216 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,142.17
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3.167	Nonpriority creditor's name and mailing address Greater Columbia Chamber of Commerce 1225 Lady Street, Suite 100 Columbia, SC 29201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$660.00
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3.168	Nonpriority creditor's name and mailing address Greenville Water Systems PO Box 687 Greenville, SC 29601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,735.54
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3.169	Nonpriority creditor's name and mailing address Groove Town Assault 53 Wax Myrtle Court Hilton Head Island, SC 29926 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,650.00
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3.170	Nonpriority creditor's name and mailing address GRP City Market LLC 198 East Bay St. Suite 300 Charleston, SC 29401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$783.26
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3.171	Nonpriority creditor's name and mailing address Hall Electrical Contractor LLC 524 Pennwood Dr. Spartanburg, SC 29306-4252 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,100.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.172	Nonpriority creditor's name and mailing address Hargray Telephone PO Box 100116 Columbia, SC 29202-3116 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,553.44
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3.173	Nonpriority creditor's name and mailing address Henry County Chamber of Commerce 1709 Highway 20 West McDonough, GA 30253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$800.00
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3.174	Nonpriority creditor's name and mailing address Henry County Health Department 137 Henry Parkway McDonough, GA 30253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
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3.175	Nonpriority creditor's name and mailing address HIGHSMITH CONSTRUCTION INC. 4 EXECUTIVE PARK ROAD Hilton Head Island, SC 29928 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,419.99
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3.176	Nonpriority creditor's name and mailing address Hilton Garden-Rock Hill 650 Tinsley Way Rock Hill, SC 29730 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,417.23
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3.177	Nonpriority creditor's name and mailing address HLS Precision Welding 2818 Pervis Rd Durham, NC 27704 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$657.09
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3.178	Nonpriority creditor's name and mailing address Home2 Suites Atlanta South McDonough 60 Mill Road McDonough, GA 30253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,422.19
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.179	Nonpriority creditor's name and mailing address Homewood Suites - Greenville SC 102 Carolina Point Parkway Greenville, SC 29607 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,310.76
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3.180	Nonpriority creditor's name and mailing address HonorBuilt LLC 2010 Avalon Parkway, Suite 400 McDonough, GA 30253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,621.14
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3.181	Nonpriority creditor's name and mailing address Hoodz of The Triangle 5817 Triangle Drive Suite 101 Raleigh, NC 27617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,514.06
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3.182	Nonpriority creditor's name and mailing address hrEDGE CONSULTING 702 LAFAYETTE BLVD Oldsmar, FL 34677 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35,868.21
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3.183	Nonpriority creditor's name and mailing address iHeartMedia PO Box 406372 Atlanta, GA 30384 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,440.00
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3.184	Nonpriority creditor's name and mailing address Impact Fire Services 340 Crompton St. Charlotte, NC 28273 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,805.87
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3.185	Nonpriority creditor's name and mailing address Impact Fire Services PO Box 1307 Morrisville, NC 27560 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.186	Nonpriority creditor's name and mailing address InMoment Inc. 950 East Paces Ferry Road NE Suite 2250 Atlanta, GA 30326 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,000.00
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3.187	Nonpriority creditor's name and mailing address Innovate Mobile LLC 2175 Cumbre Pl El Cajon, CA 92020 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,030.00
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3.188	Nonpriority creditor's name and mailing address Innovation & Design in Architecture 115 Pine Ave. Suite 250 Long Beach, CA 90802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,420.00
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3.189	Nonpriority creditor's name and mailing address Innovation & Design in Architecture 1712 Euclid Avenue Charlotte, NC 28203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.190	Nonpriority creditor's name and mailing address Integrated Technology Concepts, LLC 164 Market St Ste 245 Charleston, SC 29401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125.00
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3.191	Nonpriority creditor's name and mailing address Integration Network LLC PO Box 668 Chandler, AZ 85244 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,930.00
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3.192	Nonpriority creditor's name and mailing address Intracoastal Fire Protection, Inc. 22 Holland Drive Castle Hayne, NC 28429-5912 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,541.00
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.193	Nonpriority creditor's name and mailing address Island Pest Control, Inc. 142 Island Dr. Hilton Head Island, SC 29926 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140.00
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3.194	Nonpriority creditor's name and mailing address ITW Food Equipment Group LLC Hobart Services PO BOX 2517 Carol Stream, IL 60132-2517 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$70.23
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3.195	Nonpriority creditor's name and mailing address J.E. S. Equipment Sales & Service 19 Midway Dr. Abbeville, SC 29620 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,587.43
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3.196	Nonpriority creditor's name and mailing address JAC Services LLC 107 Elks Lodge Lane Summerville, SC 29483 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,185.64
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3.197	Nonpriority creditor's name and mailing address Jacob Bornman 213 Circle Drive, Lot 6 Pendleton, SC 29670 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$138.52
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3.198	Nonpriority creditor's name and mailing address James M. Brannigan 8305 Bailey Mill Rd Gainesville, GA 30506 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28,750.00
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3.199	Nonpriority creditor's name and mailing address James Reeves 3003 Starboard Dr Augusta, GA 30909 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,391.99
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.200	Nonpriority creditor's name and mailing address Jason S Valakis 2309 Kings Gate Ln Mount Pleasant, SC 29466 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00
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3.201	Nonpriority creditor's name and mailing address Jay A. Hansel Advanced Leather Care 308 Dogwood Ln Lillington, NC 27546 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,150.00
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3.202	Nonpriority creditor's name and mailing address JEA PO BOX 45047 Jacksonville, FL 32232 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,433.22
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3.203	Nonpriority creditor's name and mailing address Jenna Collins 1056 GLEN LAUREL DRIVE Fort Mill, SC 29707 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,701.79
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3.204	Nonpriority creditor's name and mailing address Jennifer Johnston 11036 Avalon Ridge Way Winter Garden, FL 34787 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$93.36
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3.205	Nonpriority creditor's name and mailing address JEREMY BRYANT MODZELEWSKI 7 CHINABERRY CIRCLE HILTON HEAD ISLAND, SC 29926 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,345.00
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3.206	Nonpriority creditor's name and mailing address Jeremy Johnson 115 Williams Rd Thomaston, GA 30286 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$450.00
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.207	Nonpriority creditor's name and mailing address Joelle Milligan 309 Huntsman Dr Goose Creek, SC 29445 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$402.23
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3.208	Nonpriority creditor's name and mailing address Jordan Olshansky, Inc 38 Westgate Way San Anselmo, CA 94960 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,000.00
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3.209	Nonpriority creditor's name and mailing address Joshua Bowers 103 Genoa Ct Greenville, SC 29611 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
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3.210	Nonpriority creditor's name and mailing address Just Let Me Do It Commercial Services 803 Hillcrest St Kannapolis, NC 28083 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,302.34
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3.211	Nonpriority creditor's name and mailing address JW Shirtworks, LLC 1816 Belgrade Ave. Suite D Charleston, SC 29407 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,683.02
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3.212	Nonpriority creditor's name and mailing address JW's Precision Lawn Care, LLC 220 Edna Ruth Lane McDonough, GA 30253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.00
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3.213	Nonpriority creditor's name and mailing address Ken Hutchins 2217 Matthews Township Parkway Suite D-179 Matthews, NC 28105 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$376.63
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.214	Nonpriority creditor's name and mailing address Kenneth Lee George 136 Keeper Lane Aiken, SC 29803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$750.00
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3.215	Nonpriority creditor's name and mailing address Kenneth Wareham 3 White Hall Ct Hilton Head Island, SC 29928 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
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3.216	Nonpriority creditor's name and mailing address KEY FIRE PROTECTION ENTERPRISES, LLC 3200 MIKE PADGETT HWY Augusta, GA 30906 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,400.00
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3.217	Nonpriority creditor's name and mailing address KeyBank Real Estate Capital 895 Central Ave, Suite 600 Cincinnati, OH 45202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,831.00
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3.218	Nonpriority creditor's name and mailing address Kimball's Plumbing Heating Elec & AC LLC 1205 Pine Drive NW Aiken, SC 29801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$488.40
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3.219	Nonpriority creditor's name and mailing address KMT Systems Inc. 2004 Henry Parkway Connector McDonough, GA 30253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,637.33
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3.220	Nonpriority creditor's name and mailing address Lawn Lovers LLC 144 Kentucky Derby Dr Clayton, NC 27520 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,800.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.221	Nonpriority creditor's name and mailing address Lee Brown 2311A Lumina Avenue North Wrightsville Beach, NC 28480 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
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3.222	Nonpriority creditor's name and mailing address Lexington Insurance Company 99 High Street Boston, MA 02110 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$257,711.00
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3.223	Nonpriority creditor's name and mailing address Life Insurance Company of North America PO Box 782447 Philadelphia, PA 19178-2447 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,544.40
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3.224	Nonpriority creditor's name and mailing address Lockton Companies 3280 Peachtree Road NE, Suite 250 Atlanta, GA 30305 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,752.00
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3.225	Nonpriority creditor's name and mailing address Loud Music Company, LLC 5500 Market St Unit 140-B Wilmington, NC 28403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
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3.226	Nonpriority creditor's name and mailing address Lowcountry Audio 945 Habersham Rd Midway, GA 31320 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$58,819.15
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3.227	Nonpriority creditor's name and mailing address M & D Pressure Washing 409 Elm Ave Anderson, SC 29625 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.228	Nonpriority creditor's name and mailing address MadPark Designs 3809 Beam Road, Suite G Charlotte, NC 28217 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$284.75
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3.229	Nonpriority creditor's name and mailing address Magnolia Park Greenville LLC 20 South Clark Street, Suite 3000 Chicago, IL 60603 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,461.31
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3.230	Nonpriority creditor's name and mailing address Main Street Development II, LLC 189 S Converse St Spartanburg, SC 29306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$59,641.93
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3.231	Nonpriority creditor's name and mailing address Marlin Business Bank 2795 E Cottonwood Parkway Suite 120 PO Box 13604 Salt Lake City, UT 84121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$111.49
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3.232	Nonpriority creditor's name and mailing address Marsh Bissell Patrick II LLC C/O Northwood Office LLC 11605 N. Community House Rd, Suite 600 Charlotte, NC 28277 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,588.00
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3.233	Nonpriority creditor's name and mailing address Martintown Landco LLC c/o Chelsea Waddell, RA 336 Georgia Avenue, Suite 106 #102 North Augusta, SC 29841 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,458.51
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3.234	Nonpriority creditor's name and mailing address Mary Catherine Strickland 4101 Senegal Ct North Charleston, SC 29420 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.235	Nonpriority creditor's name and mailing address Mastercard Corp 2000 Purchase Street Purchase, NY 10577 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,879.10
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3.236	Nonpriority creditor's name and mailing address Matt Shaver Southern Solutions 7500 Babe Stillwell Farm Rd Huntersville, NC 28078 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.19
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3.237	Nonpriority creditor's name and mailing address Matthew Christian 2741 Jobee Dr APT 3066 Charleston, SC 29414 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$48.03
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3.238	Nonpriority creditor's name and mailing address Meetze Plumbing Company Inc 10009 Broad River Road Irmo, SC 29063 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,150.81
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3.239	Nonpriority creditor's name and mailing address Melissa Johnson 313 MOSES RHYNE DR Mt Holly, NC 28120 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,450.94
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3.240	Nonpriority creditor's name and mailing address MENUWORKS.COM 8 SUNBELT BUSINESS PARK DRIVE Greer, SC 29650 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,069.07
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3.241	Nonpriority creditor's name and mailing address Meridian Intelligent Systems 483 Commerce Park Dr. SE Suite A Marietta, GA 30060 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,164.18
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.242	Nonpriority creditor's name and mailing address Meridian Waste PO Box 580231 Charlotte, NC 28258 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28,728.88
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3.243	Nonpriority creditor's name and mailing address METROGREENSCAPE INC 3026 Stewart Creek Blvd Charlotte, NC 28216 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,571.50
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3.244	Nonpriority creditor's name and mailing address Micah Bacon 116 SNEAD ROAD Fort Mill, SC 29715 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,275.25
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3.245	Nonpriority creditor's name and mailing address Michael & Sons Services 140 Dupree St. Charlotte, NC 28208 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$760.43
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3.246	Nonpriority creditor's name and mailing address Michael Ponder 5 Beau Ct Beaufort, SC 29907 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,200.00
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3.247	Nonpriority creditor's name and mailing address Michael T Amburgey - ExpReimb 1012 Council Fire Circle Indian Trail, NC 28079 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$509.41
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3.248	Nonpriority creditor's name and mailing address Microsoft 365 One Microsoft Way Redmond, WA 98052 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,975.36
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.249	Nonpriority creditor's name and mailing address MIMEO.COM,INC. PO BOX 654018 Dallas, TX 75265 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$82,994.64
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3.250	Nonpriority creditor's name and mailing address Modern Plumbing Co.of Charlotte Inc. 513 Woodlawn St Mount Holly, NC 28120 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,884.05
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3.251	Nonpriority creditor's name and mailing address MomentFeed UB Inc. c/o Uberall, Inc. 600 California St San Francisco, CA 94108 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,413.68
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3.252	Nonpriority creditor's name and mailing address Mowry Electric Inc 9347 Kent Ave Huntersville, NC 28078 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$807.40
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3.253	Nonpriority creditor's name and mailing address MR. ROOTER PO BOX 369 Oak Island, NC 28465-6853 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,088.94
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3.254	Nonpriority creditor's name and mailing address Mr. Rooter Plumbing 3330 Marathon Ct, Ste B North Charleston, SC 29418 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,738.07
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3.255	Nonpriority creditor's name and mailing address Mr. Rooter Plumbing of Greenville 1341 Rutherford Road Greenville, SC 29609 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,737.80
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Debtor Name	Case number (if known)	23-30474
3.256 Nonpriority creditor's name and mailing address Multi Unit Analytics, LLC 679 Fraser St SE Atlanta, GA 30315 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,600.00
3.257 Nonpriority creditor's name and mailing address Music Will (fka Little Kids Rock Inc.) PO Box 43369 Montclair NJ 07043, NJ 07043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$73,487.00
3.258 Nonpriority creditor's name and mailing address My Jacksonville Landscaper 1719 Penman Rd Jacksonville Beach, FL 32250 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,855.00
3.259 Nonpriority creditor's name and mailing address Nateara Glover 1237 Sumner Ave, Unit D11 29406 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.260 Nonpriority creditor's name and mailing address NC Department of Labor Budget and Management Division 1101 Mail Service Center Raleigh, NC 27699-1101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$545.70
3.261 Nonpriority creditor's name and mailing address NC Labor Law Poster Service 4501 New Bern Ave, Suite 130 Raleigh, NC 27610-1550 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$99.50
3.262 Nonpriority creditor's name and mailing address NCR CORP. 864 Spring St NW Atlanta, GA 30308 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$41,366.77

	Debtor Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known) 23-30474	
3.263	Nonpriority creditor's name and mailing address New Market Waste Solutions LLC PO Box 603843 Charlotte, NC 28260-3843 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,705.24
3.264	Nonpriority creditor's name and mailing address Nobody Entertainment LLC 200 Brushy Creek Road Easley, SC 29642 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.00
3.265	Nonpriority creditor's name and mailing address North Charleston Sewer District PO BOX 63009 North Charleston, SC 29419-3009 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$185.00
3.266	Nonpriority creditor's name and mailing address OBCO Corp PO Box 61119 North Charleston, SC 29419 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,125.42
3.267	Nonpriority creditor's name and mailing address Old Forum LLC 9224 Kings Parade Blvd, Suite 2101 Charlotte, NC 28273 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$145,642.21
3.268	Nonpriority creditor's name and mailing address Old Forum LLC 2127 Ayrsley Blvd., Suite 302 Charlotte, NC 28273 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.269	Nonpriority creditor's name and mailing address Olo Inc. 285 Fulton St, Floor 82 New York, NY 10007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,297.18

Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.270	Nonpriority creditor's name and mailing address On Call Plumbing, Heating & Air (Corp) 3770 Fernandina Rd. Columbia, SC 29210 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,007.00
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3.271	Nonpriority creditor's name and mailing address ONE LOCKSMITH 4626 KETTLEWELL RDG Rock Hill, SC 29732 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$834.26
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3.272	Nonpriority creditor's name and mailing address Orange Door Music Video, Inc. 1860 Chicago Ave Ste G7 Riverside, CA 92507 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,553.00
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3.273	Nonpriority creditor's name and mailing address Orkin 6650 Rivers Avenue Charleston, SC 29406 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$380.00
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3.274	Nonpriority creditor's name and mailing address Palmetto Electric PO Box 530812 Atlanta, GA 30353-0812 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,984.17
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3.275	Nonpriority creditor's name and mailing address Palmetto Utilities, Inc. 1713 Woodcreek Farms Rd, Suite A Elgin, SC 29045 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,179.83
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3.276	Nonpriority creditor's name and mailing address Panthers Football 800 South Mint Street Charlotte, NC 28202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,500.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.277	Nonpriority creditor's name and mailing address PARAGON PROPANE PO BOX 77724 Charlotte, NC 28271 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,558.41
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3.278	Nonpriority creditor's name and mailing address Patrick Cristaldi 23 South Forest Beach Dr Apt 284 Hilton Head, SC 29928 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,800.00
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3.279	Nonpriority creditor's name and mailing address Pearson Heating & Air LLC 357 South Ave. Spartanburg, SC 29306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,079.48
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3.280	Nonpriority creditor's name and mailing address Peevey Inc. (Roto-Rooter Charleston) 3630 State Rd. S-10-1024 Johns Island, SC 29455 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,542.69
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3.281	Nonpriority creditor's name and mailing address Phoenix Signs 2940 Champaign St. Charlotte, NC 28210 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,250.00
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3.282	Nonpriority creditor's name and mailing address Piedmont Natural Gas PO Box 1246 Charlotte, NC 28201-1246 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,437.93
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3.283	Nonpriority creditor's name and mailing address PINNACLE PRESSURE WASHING & PROPERTY 107 Brookmeade Dr. Statesville, NC 28625 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.284	Nonpriority creditor's name and mailing address Pinnacle Roofing Contractors Inc PO Box 56826 Jacksonville, FL 32241 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,471.22
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3.285	Nonpriority creditor's name and mailing address Piper Plumbing LLC (S-Corp) PO BOX 5264 Hilton Head, SC 29938 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125.00
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3.286	Nonpriority creditor's name and mailing address PipeTechs Plumbing Inc. 6600 Mt Herman Rd Raleigh, NC 27617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,627.63
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3.287	Nonpriority creditor's name and mailing address Pitney Bowes Purchase Power PO Box 371874 Pittsburgh, PA 15250-7874 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,061.95
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3.288	Nonpriority creditor's name and mailing address Plumb Pro 111 A Lumber Lane Goose Creek, SC 29445 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,804.05
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3.289	Nonpriority creditor's name and mailing address Preferred Benefit Administrators PO Box 916188 Longwood, FL 32791-6188 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$888.67
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3.290	Nonpriority creditor's name and mailing address Premier Grease Inc PO Box 3535 Alpharetta, GA 30023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,510.71
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Debtor Name	Case number (if known)	
Aetius Restaurant Holdings, LLC	23-30474	
3.291 Nonpriority creditor's name and mailing address PricewaterhouseCoopers LLP PO Box 932011 Altanta, GA 31193-2011 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$49,935.00
3.292 Nonpriority creditor's name and mailing address Pro Chef Inc PO BOX 4057 Mooresville, NC 28117 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$665.04
3.293 Nonpriority creditor's name and mailing address Pro Disposal 5237 N Okatie Hwy Ridgeland, SC 29936 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,155.00
3.294 Nonpriority creditor's name and mailing address PRO KITCHEN SALES AND SERVICE 2115 COMMERCE DRIVE Cayce, SC 29033 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,963.61
3.295 Nonpriority creditor's name and mailing address PROSERVE FIRE PROTECTION INC. 4849 Linksland Drive Holly Springs, NC 27540 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,335.44
3.296 Nonpriority creditor's name and mailing address PROSERVE HOOD & DUCT SERVICES 1000 North Main Street Fuquay-Varina, NC 27526 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,217.00
3.297 Nonpriority creditor's name and mailing address Public Storage 25908 5607 S TRYON ST Charlotte, NC 28217 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,182.25

Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.298	Nonpriority creditor's name and mailing address Punchh Inc PO Box 536257 Pittsburgh, PA 15253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$228,671.75
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3.299	Nonpriority creditor's name and mailing address Pye Barker Fire & Safety LLC PO Box 503 Piedmont, SC 29673 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$823.15
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3.300	Nonpriority creditor's name and mailing address Quality Electric Construction Inc. 726 Brogan Avenue Anderson, SC 29625 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,480.78
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3.301	Nonpriority creditor's name and mailing address Quality of Charleston 5524 Dutton Av Unit B-8 North Charleston, SC 29406 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,830.00
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3.302	Nonpriority creditor's name and mailing address RAY GOODMAN PO BOX 1225 Jonesboro, GA 30237 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,100.00
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3.303	Nonpriority creditor's name and mailing address RC REFRIGERATION, LLC 13534 Plaza Rd. Ext Charlotte, NC 28215 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$747.73
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3.304	Nonpriority creditor's name and mailing address Ready Lock Inc PO Box 2081 Cumming, GA 30028-2081 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$218.50
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.305	Nonpriority creditor's name and mailing address RECORDERS COURT OF CHATHAM COUNTY 133 MONTGOMERY ST Room 308 Savannah, GA 31401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,571.75
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3.306	Nonpriority creditor's name and mailing address Records Reduction Inc 2032-F Independence Commerce Dr Matthews, NC 28105 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$508.82
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3.307	Nonpriority creditor's name and mailing address Refrigeration Heroes, Inc 426 S Buncombe Road Greer, SC 29650 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,309.60
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3.308	Nonpriority creditor's name and mailing address Regency Centers Corporation 3715 Northside Parkway NW, Suite 400 Atlanta, GA 30327 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125,383.36
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3.309	Nonpriority creditor's name and mailing address Regions Bank 1900 Fifth Avenue North Birmingham, AL 35203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$166,956.47
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3.310	Nonpriority creditor's name and mailing address Republic Services #742 (125) PO Box 9001099 Louisville, KY 40290-1099 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,066.69
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3.311	Nonpriority creditor's name and mailing address Republic Services #800 (123) For BFI Waste Services LLC PO Box 9001099 Louisville, KY 40290-1099 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,676.94
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.312	Nonpriority creditor's name and mailing address Residence Inn Raleigh-Durham Airport 10600 Little Brier Creek Raleigh, NC 27617 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,031.60
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3.313	Nonpriority creditor's name and mailing address Restaurant365 500 Technology Dr, Suite 200 Irvine, CA 92618 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$71,304.61
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3.314	Nonpriority creditor's name and mailing address REWARDS NETWORK ESTABLISHMENT SERVICES 540 W. MADISON ST, ST 2400 Chicago, IL 60661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,224.99
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3.315	Nonpriority creditor's name and mailing address Richard Murdaugh 2003 Greene St Columbia, SC 29205 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$394.72
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3.316	Nonpriority creditor's name and mailing address Richard Turner Seekford 301 E. Bedford Rd Wilmington, NC 28411 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$175.00
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3.317	Nonpriority creditor's name and mailing address RM Services & Sales Inc. 1930 Castle Hayne Rd, Ste 5 Wilmington, NC 28401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$944.81
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3.318	Nonpriority creditor's name and mailing address Roger West LLC 303 Perimeter Center North Suite 300 Atlanta, GA 30346 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,775.00
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.319	Nonpriority creditor's name and mailing address Rolland Reash Plumbing Inc. 11606 Columbia Park Dr E Jacksonville, FL 32258 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,281.20
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3.320	Nonpriority creditor's name and mailing address Ronald Cureton RC Refrigeration LLC 10407 Battle Ct Charlotte, NC 28215 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,735.64
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3.321	Nonpriority creditor's name and mailing address Rooter Man Plumbing PO Box 30098 Charleston, SC 29417-0098 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$893.00
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3.322	Nonpriority creditor's name and mailing address Roto Rooter 5672 Collections Center Drive Chicago, IL 60693-0056 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,336.38
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3.323	Nonpriority creditor's name and mailing address RSM US LLP 300 S Tryon St #1500 Charlotte, NC 28202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$73,500.00
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3.324	Nonpriority creditor's name and mailing address RWT Marketing, LLC 2508 Monarch Bay Dr Las Vegas, NV 89128 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$724.45
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3.325	Nonpriority creditor's name and mailing address Rytec Electric 100 Old Cherokee Road, Suite F #329 Lexington, SC 29072 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$457.23
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.326	Nonpriority creditor's name and mailing address Sandhill Center LLC c/o Stiles Property Management 481 Town Center Place, Suite 2 Columbia, SC 29229 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92,204.00
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3.327	Nonpriority creditor's name and mailing address Sandy Springs Water District, Inc. 6910 US-76 Pendleton, SC 29670 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$565.67
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3.328	Nonpriority creditor's name and mailing address Sard & Leff, LLC 3789 Roswell Road NE Atlanta, GA 30342 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,435.06
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3.329	Nonpriority creditor's name and mailing address Sargent Pest Solutions PO BOX 718 Mauldin, SC 29662 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$700.00
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3.330	Nonpriority creditor's name and mailing address SC Dept of Health and Enviro Control 2600 BULL ST Columbia, SC 29201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,250.00
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3.331	Nonpriority creditor's name and mailing address SC Dept. Rev. Alcohol Licensing P.O. Box 125 Columbia, SC 29214-0907 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,700.00
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3.332	Nonpriority creditor's name and mailing address Scott Rule 219 Newport Dr Jacksonville, NC 28540 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$663.30
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.333	Nonpriority creditor's name and mailing address Securitas Technology Corporation 8350 Sunlight Drive Fishers, IN 46037 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$769.11
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3.334	Nonpriority creditor's name and mailing address SECURITY CENTRAL PO Box 602371 Charlotte, NC 28260-2371 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$481.60
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3.335	Nonpriority creditor's name and mailing address Segra Communications PO Box 631140 Cincinnati, OH 45263-1140 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$251,106.00
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3.336	Nonpriority creditor's name and mailing address SESAC INC PO Box 5246 New York, NY 10008-5246 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,861.74
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3.337	Nonpriority creditor's name and mailing address Sharp Electronics Corporation 100 Paragon Drive Montvale, NJ 07645 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,444.44
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3.338	Nonpriority creditor's name and mailing address Shiv Shakti Investments LLC 2030 Avalon Parkway, Suite 200 McDonough, GA 30253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$223,771.89
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3.339	Nonpriority creditor's name and mailing address Silliker, Inc. 401 N Michigan Ave, Ste 1400 Chicago, IL 60611 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,616.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.340	Nonpriority creditor's name and mailing address SIR RALEIGH ELECTRIC, INC. 26 Apothecary Ct Garner, NC 27529 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$484.92
3.341	Nonpriority creditor's name and mailing address Sir Speedy 436 South Center Street Statesville, NC 28677 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,230.07
3.342	Nonpriority creditor's name and mailing address Snagajob.com, Inc. 32978 Collections Center Dr. Chicago, IL 60693-0329 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,871.12
3.343	Nonpriority creditor's name and mailing address Soggy Dollar Pressure Washing 7937 Country Lakes Rd. Wilmington, NC 28411 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$550.00
3.344	Nonpriority creditor's name and mailing address Solid Entertainment Group LLC c/o David Britt, Registered Agent 615 Lady Street Columbia, SC 29201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.345	Nonpriority creditor's name and mailing address SOMPO International 13146 Ballantyne Corporate Pl, Suite 300 Charlotte, NC 28277 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,000.00
3.346	Nonpriority creditor's name and mailing address South East Landscape Services PO Box 444 Bluffton, SC 29910 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,100.00

Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.347	Nonpriority creditor's name and mailing address SOUTH ISLAND PUBLIC SERVICE DISTRICT PO BOX 5148 Hilton Head Island, SC 29928 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,859.25
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3.348	Nonpriority creditor's name and mailing address Southeastern Electrical Specialists LLC 2855 Pineview Road Augusta, GA 30909 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,690.49
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3.349	Nonpriority creditor's name and mailing address Southern Lighting Services, Inc. PO BOX 7599 Ocean Isle Beach, NC 28469 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,868.44
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3.350	Nonpriority creditor's name and mailing address Southern Realty Development Group c/o Ben D. Arnold, Registered Agent 700 Gervais Street, Suite 175 Columbia, SC 29201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,439.61
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3.351	Nonpriority creditor's name and mailing address Spartanburg Water System PO BOX 251 Spartanburg, SC 29304 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,578.90
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3.352	Nonpriority creditor's name and mailing address St. John's Fire Equipment Inc. 6000 Philips Highway, Suite 10 Jacksonville, FL 32216 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,602.29
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3.353	Nonpriority creditor's name and mailing address Stanley Convergent Security SolutionNOW9 Dept Ch 10651 Palatine, IL 60055 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,324.00
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.354	Nonpriority creditor's name and mailing address Staples 500 Staples Drive Framingham, MA 01702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,630.91
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3.355	Nonpriority creditor's name and mailing address State Employees Health Plan 1516 Dawson Street Wilmington, NC 28401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,459.25
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3.356	Nonpriority creditor's name and mailing address Stewart Jenkins and Clekis Law Firm Clekis Law Firm PO Box 1867 Charleston, SC 29402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,667.50
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3.357	Nonpriority creditor's name and mailing address STORE Master Funding VII, LLC 8377 E. Hartford Dr, Ste 100 Scottsdale, AZ 85255 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,000.00
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3.358	Nonpriority creditor's name and mailing address Stuart A. Sauls 439 Washboard Ln Ridgeland, SC 29936 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300,981.16
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3.359	Nonpriority creditor's name and mailing address Sullivan PTO 1825 Eden Terrace Rock Hill, SC 29730 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$550.00
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3.360	Nonpriority creditor's name and mailing address Summit Consulting LLC Bridgefield Casualty Insurance Co PO Box 988 Lakeland, FL 33802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,128.51
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.361	Nonpriority creditor's name and mailing address Superior Services TM LLC 36 Persimmon, St #202 Bluffton, SC 29910 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$729.00
<hr/>			
3.362	Nonpriority creditor's name and mailing address Swift Curie McGhee & Hiers LLP 1420 Peachtree St NE #800 Atlanta, GA 30309 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$71,111.74
<hr/>			
3.363	Nonpriority creditor's name and mailing address Swift Fire Protection 2450 Satellite Blvd Duluth, GA 30096 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$985.00
<hr/>			
3.364	Nonpriority creditor's name and mailing address Synergi Partners Inc. PO Box 5599 Florence, SC 29501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,195.81
<hr/>			
3.365	Nonpriority creditor's name and mailing address Szabo Associates, Inc. 3355 Lenox Road NE, Suite 945 Atlanta, GA 30326 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,703.25
<hr/>			
3.366	Nonpriority creditor's name and mailing address T. Cooper Hull Photography LLC 4119 Brandie Glen Rd Charlotte, NC 28269 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.00
<hr/>			
3.367	Nonpriority creditor's name and mailing address Take 44 Presents, LLC 3175 Country Rd 108 Building 2, Suite A Gonzales, TX 78629 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,400.00

Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.368	Nonpriority creditor's name and mailing address Tattoo Projects 704 Morris St Charlotte, NC 28202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,537.74
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3.369	Nonpriority creditor's name and mailing address TavernTrak LLC 9540 Garland Road, STE 381-312 Dallas, TX 75218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,625.41
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3.370	Nonpriority creditor's name and mailing address Team Mechanical LLC 3585 Centre Circle Fort Mill, SC 29715 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,246.27
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3.371	Nonpriority creditor's name and mailing address Technocom Business Systems Inc. 3330 Monroe Rd Charlotte, NC 28205 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$488.94
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3.372	Nonpriority creditor's name and mailing address TECO Peoples Gas PO Box 31318 Tampa, FL 33631-3318 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$978.79
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3.373	Nonpriority creditor's name and mailing address Tersh Enterprise LLC DBA Service Emperor Service Emperor 8578 Greenhouse Rd Metter, GA 30439 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,493.26
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3.374	Nonpriority creditor's name and mailing address The 20 LLC 6600 Chase Oaks Blvd Suite 100 Plano, TX 75023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,332.04
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.375	Nonpriority creditor's name and mailing address The Insta Copy Shop, Ltd dba ici Printin 4311 South Blvd., Suite D Charlotte, NC 28209 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.376	Nonpriority creditor's name and mailing address The Merchants Company, LLC c/o Craig N. Orr 535 North Fifth Avenue Post Office 1289 Laurel, MS 39441 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
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3.377	Nonpriority creditor's name and mailing address The Seat Doctor c/o Auto Body Technologies, Inc 110 Herndon Springs Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,255.32
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3.378	Nonpriority creditor's name and mailing address Thomas Restaurant Equipment Inc. 1210 Alleghany Street Charlotte, NC 28208 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,725.81
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3.379	Nonpriority creditor's name and mailing address Threadgill Agency LLC 4145 Travis Street Suite 300 Dallas, TX 75204 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,500.00
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3.380	Nonpriority creditor's name and mailing address THYSSENKRUPP ELEVATOR CORP PO BOX 933004 Atlanta, GA 31193 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$278.86
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3.381	Nonpriority creditor's name and mailing address TIDELANDS AC & REFRIGERATION INC 83 RILEY FARMS RD Ridgeland, SC 29936 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$315.00
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.382	Nonpriority creditor's name and mailing address Time Warner Cable 7815 Crescent Executive Dr Charlotte, NC 28217 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,029.43
<hr/>			
3.383	Nonpriority creditor's name and mailing address Tinder Box 4400 Sharon Road Charlotte, NC 28211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$804.07
<hr/>			
3.384	Nonpriority creditor's name and mailing address TJS Deemer Dana LLP (Corp) 118 Park of Commerce Dr, Ste 200 Savannah, GA 31405 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,877.50
<hr/>			
3.385	Nonpriority creditor's name and mailing address TK Elevator PO Box 3796 Carol Stream, IL 60132-3796 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,152.31
<hr/>			
3.386	Nonpriority creditor's name and mailing address Town of Hilton Head Island One Town Center Court Hilton Head Island, SC 29928 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$230.77
<hr/>			
3.387	Nonpriority creditor's name and mailing address Trash Gurl 327 Cypress Gardens Road Moncks Corner, SC 29461 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$582.94
<hr/>			
3.388	Nonpriority creditor's name and mailing address Travelers Travelers CL Remittance Center PO Box 660317 Dallas, TX 75266-0317 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$227.80

Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.389	Nonpriority creditor's name and mailing address Triadex Services, LLC 5334 Primrose Lake Cir. Tampa, FL 33647 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,545.00
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3.390	Nonpriority creditor's name and mailing address TriMark USA 2801 South Valley Parkway, Suite 200 Lewisville, TX 75067 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,688.00
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3.391	Nonpriority creditor's name and mailing address TWC Services Inc. 14036 S. Lakes Dr. Charlotte, NC 28273 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$43,017.37
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3.392	Nonpriority creditor's name and mailing address U.S. Small Business Administration 409 3rd St., SW Washington, DC 20416 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500,000.00
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3.393	Nonpriority creditor's name and mailing address UniFi Equipment Finance, Inc. 801 W. Ellsworth Road Ann Arbor, MI 48108 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,452.37
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3.394	Nonpriority creditor's name and mailing address Unifirst First Aid and Safety 3499 Rider Trail S St. Louis, MO 63045 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$397.69
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3.395	Nonpriority creditor's name and mailing address United Healthcare UHS Premium Billing PO BOX 94017 Palatine, IL 60094-4017 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$78,436.00
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.396	Nonpriority creditor's name and mailing address UNITED MILITARY MARKETING, LLC. 2080 NORTHBROOK BLVD North Charleston, SC 29406 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$965.15
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3.397	Nonpriority creditor's name and mailing address Up On a Tuesday LLC 16302 Autumn Cove Ln Huntersville, NC 28078 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,800.00
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3.398	Nonpriority creditor's name and mailing address UPS 55 GLENLAKE PKWY Atlanta, GA 30328-3474 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$689.99
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3.399	Nonpriority creditor's name and mailing address US Assure Insurance Svs of FL, Inc. PO Box 935597 Atlanta, GA 31193-5597 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,365.00
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3.400	Nonpriority creditor's name and mailing address Valley Proteins Inc. PO BOX 643393 Cincinnati, OH 45264 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,135.00
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3.401	Nonpriority creditor's name and mailing address Vaughn T. Hall 220 Drawdebil Rd Gilbert, SC 29054 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
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3.402	Nonpriority creditor's name and mailing address Verizon Wireless PO Box 660108 Dallas, TX 75266-0108 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$978.34
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Debtor	Aetius Restaurant Holdings, LLC Name	Case number (if known)	23-30474
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3.403	Nonpriority creditor's name and mailing address Villa's Lawncare LLC 133 Eastbrook Park Dr. Aiken, SC 29801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,335.00
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3.404	Nonpriority creditor's name and mailing address Vital Records Control PO Box 11407 Dept. 5874 Birmingham, AL 35246-5874 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,615.40
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3.405	Nonpriority creditor's name and mailing address Waste Connections of Charlotte 5516 Rozzelles Ferry Rd Charlotte, NC 28214 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,108.54
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3.406	Nonpriority creditor's name and mailing address We Wash Windows SC LLC 104 Papa Lane West Columbia, SC 29172 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$290.00
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3.407	Nonpriority creditor's name and mailing address Weavetec - Benchmark PO Box 579 Blacksburg, SC 29702 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,529.80
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3.408	Nonpriority creditor's name and mailing address Weiss Creative Inc 189 Wind Chime Ct Ste 104 Raleigh, NC 27615-6572 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,700.00
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3.409	Nonpriority creditor's name and mailing address WHALEY FOOD SERVICE PO Box 615 Lexington, SC 29071-0615 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28,048.66
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Debtor	Aetius Restaurant Holdings, LLC <small>Name</small>	Case number (if known)	23-30474
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3.410	Nonpriority creditor's name and mailing address William Parrish Plumbing 7900 Brier Creek Parkway Raleigh, NC 27617 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$648.86
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3.411	Nonpriority creditor's name and mailing address Windstream Communication REGISTERED AGENT SOLUTIONS, INC. 828 LANE ALLEN ROAD, SUITE 219 Lexington, KY 40504 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,578.65
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3.412	Nonpriority creditor's name and mailing address Wrightsville Beach Landscaping Inc PO Box 805 Wrightsville Beach, NC 28480 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,708.43
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3.413	Nonpriority creditor's name and mailing address Xerographic Digital Printing Inc 1948 33rd Street Orlando, FL 32839 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,629.51
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3.414	Nonpriority creditor's name and mailing address Yelp Inc 350 Mission Street San Francisco, CA 94105 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,992.00
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3.415	Nonpriority creditor's name and mailing address Yohe Plumbing of Aiken Inc PO Box 3836 Aiken, SC 29802 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,480.00
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3.416	Nonpriority creditor's name and mailing address York County Treasurer 1070 Heckle Blvd Box 14, Ste 1100 Rock Hill, SC 29732 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,220.74
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Debtor **Aetius Restaurant Holdings, LLC** Case number (if known) **23-30474**
Name

3.417 Nonpriority creditor's name and mailing address **York Natural Gas**
PO Box 11907
Rock Hill, SC 29731-1907
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: Check all that apply. **\$8,505.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.418 Nonpriority creditor's name and mailing address **Zenith Insurance Company**
4415 Collections Center Drive
PO Box 9055
Van Nuys, CA 91499-4076
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: Check all that apply. **\$8,935.31**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.419 Nonpriority creditor's name and mailing address **Zeta Tua Alpha Foundation, Inc**
1036 S Rangeline Rd
Carmel, IN 46032
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: Check all that apply. **\$124.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Internal Revenue Service Attn: Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101-7346	Line 2.18 <input type="checkbox"/> Not listed. Explain _____	—
4.2	Nateara Glover c/o India D. Shaw Poulin Willey Anastopoulos, LLC 32 Ann Street Charleston, SC 29403	Line 3.259 <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	\$ 1,516,783.90
5b. Total claims from Part 2	\$ 7,661,932.03
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	\$ 9,178,715.93

Fill in this information to identify the case:

Debtor name Aetius Restaurant Holdings, LLC

United States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINA

Case number (if known) 23-30474

☒ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2023 to Filing Date

☒ Operating a business
☐ Other _____

\$32,556.00

For prior year:
From 1/01/2022 to 12/31/2022

☒ Operating a business
☐ Other _____

\$74,675.00

For year before that:
From 1/01/2021 to 12/31/2021

☒ Operating a business
☐ Other _____

\$135,914.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **Aetius Restaurant Holdings, LLC**Case number (if known) **23-30474**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See attached		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Axum Capital Partners See attached breakdown		\$12,332.00	Lease Payments
4.2. Mark Cote See attached breakdown		\$119,873.00	Wages and Expenses
4.3. Muhsin Muhammad II See attached breakdown		\$50,000.00	Expense Reimbursement
4.4. Denis Ackhah-Yensu See attached breakdown		\$495,586.00	Expense Reimbursement

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

Debtor **Aetius Restaurant Holdings, LLC**Case number (if known) **23-30474**☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Chatmeter v. Wild Wing Café, Inc.		California	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Insta Copy Shop LTD v. Wild Wing Café		Mecklenburg County, NC	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	SC Liquor License	Notice of Intent to Suspend		<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4.	Honorbuilt, LLC v. Wild Wing Cafe and Axum Capital Partners, LLC 22-CV-04525		District Court, Northern District of GA	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.5.	Shipe Dosik Law, LLC v. Aetius Case #23-M-11732		Georgia	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.6.	HomeTrust Bank vs. Aetius Companies, LLC, Aetius Intermediate Company, LLC, Aetius Franchising, LLC, Aetius Restaurant Holdings, LLC, Aetius Restaurant Group, LLC, Jacksonville WWC, LLC, Savannah WWC, LLC, SW Charlotte, LLC, Charlotte Uptown Wings LLC, Gastonia Wings LLC, Raleigh Wings, LLC, Wilmington Wings LLC, Anderson Wings, LLC, Columbiana Wings, LLC, Sandhill Wing LLC, Vista Wings LLC, Greenville WWC LLC, Wild Wing of Hilton Head LLC, Wings Over Spartanburg LLC, Wings Over Spartanburg II, Case #23CV02549		Buncombe County, NC Superior Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.7.	Chuy's Opco, Inc. v. Jacksonville Wings / Aetius Case #23 CVS 1397	Breach of Contract - Lease		<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.8.	Wild Wings of Charlotte	Dhanraj Emanuel and Benjamin Spence Albright (Photographer)	NC	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Aetius Restaurant Holdings, LLC**Case number (if known) **23-30474**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.9.	Wild Wings of Charlotte, LLC Case #23 N 287	Tax Liability		<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10	Innovation & Design in Architecture (IDA) v. Aetius Companies, LLC and Aetius Restaurant Holdings, LLC Case #23 CVD 11468	Breach of Contract	Mecklenburg County, NC District Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11	Sandhills Center v. Sandhill Wing, LLC (Richland County) Case #2022-CP-40-1094	Judgment	SC	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.12	Main Street Development, II, LLC v. Wings Over Spartanburg / Aetius Case #2023 CV 4210100604	Settlement Agreement	SC	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.13	Aetius Companies / Columbiana Wings, LLC / Vista Wings, LLC	Balance Due to Travelers Ins.	SC	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.14	Wild Wing of Hilton Head Case # 23 CVS 1397		SC	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.15	The Merchants Company, LLC v. Aetius Restaurant Holdings, LLC 23-369		County Court, Forrest County, MS	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.16	Georgia Air & Refrigeration, Inc. v. Aetius Restaurant Holdings LLC 23-A-03114-11		Superior Court Gwinett County, GA	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.17	Nateara Glover v. Jim Russell, et al. 2023-CP-10-03588	Personal Injury	Charleston County Common Pleas Court	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Debtor **Aetius Restaurant Holdings, LLC**Case number (if known) **23-30474****Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.		04/28/2023: \$2,650.83 04/28/2023: \$3,126.67 04/28/2023: \$3,354.17 05/19/2023: \$10,000.00 06/02/2023: \$5,715.00	\$24,847.00
Blystone & Donaldson LLC 211 East Boulevard Charlotte, NC 28203			

Email or website address

Who made the payment, if not debtor?
Axum Partners LLC

11.2.		5/10/2023: \$40,000 07/18/2023: \$11,000 07/18/2023: \$34,760 (filing fees)	\$85,760.00
Hamilton Stephens Steele + Martin, PLLC 525 North Tryon Street, Suite 1400 Charlotte, NC 28202			

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

Debtor **Aetius Restaurant Holdings, LLC**Case number (if known) **23-30474**

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
14.1. 205 Regency Exec Park Dr Suite 204 Charlotte, NC 28217	5/25/16 - 2/23/21
14.2. 10800 Sikes Place Suite 370 Charlotte, NC 28277	2/23/21 - 2/22/23

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

☒ No.

☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

☒ No. Go to Part 10.

☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses,

Debtor **Aetius Restaurant Holdings, LLC**Case number (if known) **23-30474**

cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	Fifth Third Bank	XXXX-	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__		Unknown
18.2.	Regions Bank	XXXX-3740	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	7/22/22	\$27,098.00
18.3.	Regions Bank	XXXX-3759	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	7/22/22	\$571.00
18.4.	Regions Bank	XXXX-3775	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	7/25/22	\$48,323.00
18.5.	Regions Bank	XXXX-3783	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	8/9/22	\$42,087.00
18.6.	Regions Bank	XXXX-3791	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	7/25/22	\$146.00
18.7.	Regions Bank	XXXX-3813	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	7/27/22	\$11.00
18.8.	Regions Bank	XXXX-3848	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	7/22/22	\$13,624.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

Debtor **Aetius Restaurant Holdings, LLC**Case number (if known) **23-30474**☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
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20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Public Storage 9400 S. Tryon St Unit E50 and F65 Charlotte, NC 28273	Howard Auen Jeff Wakem	Ayrsley restaurant equipment	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Extra Space Storage 10140 S. Tryon St Unit #501 Charlotte, NC 28217	Howard Auen Jeff Wakem	Hilton Head restaurant equipment	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Debtor **Aetius Restaurant Holdings, LLC**Case number (if known) **23-30474**

Site name and address

Governmental unit name and address

Environmental law, if known

Date of notice

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
- ☐ Yes. Provide details below.

Site name and address

Governmental unit name and address

Environmental law, if known

Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

EIN:

From-To

25.1. **Aetius Restaurant Group,
LLC
6100 Fairview Road, Suite
1156
Charlotte, NC 28210**

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address

Date of service

From-To

26a.1. **RSM US LLP
300 S Tryon St, #1500
Charlotte, NC 28202**

1/25/21-12/31/22

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

Name and address

Date of service

From-To

26b.1. **RSM US, LLP
300 S Tryon St, #1500
Charlotte, NC 28202**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☐ None

Name and address

If any books of account and records are
unavailable, explain why

26c.1. **Tris, LLC
200 Central Ave Ste 325
Saint Petersburg, FL 33701**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

Debtor **Aetius Restaurant Holdings, LLC**

Case number (if known) **23-30474**

☐ None

Name and address

26d.1. **HomeTrust Bank**
100 Queens Road
Charlotte, NC 28204

26d.2. **Store Master Funding X, LLC**
8377 E. Hartford Drive, Suite 100
Scottsdale, AZ 85255

26d.3. **Lockton**
3280 Peachtree Road NE
Suite 250
Atlanta, GA 30305

26d.4. **Sysco Columbia, LLC**
PO Box 9224
Columbia, SC 29290

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

☒ Yes. Give the details about the two most recent inventories.

	Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.1	.	As of 12/26/21	\$511,266 Lower of cost or market (cost measured on a FIFO basis)
	Name and address of the person who has possession of inventory records		
	RSM as part of FY21 audit		

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Denis Ackah-Yensu,		Manager	
Name	Address	Position and nature of any interest	% of interest, if any
Muhsin Muhammad II		Manager	
Name	Address	Position and nature of any interest	% of interest, if any
Mark Cote		CEO	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No

☒ Yes. Identify below.

Debtor **Aetius Restaurant Holdings, LLC**Case number (if known) **23-30474**

Name	Address	Position and nature of any interest	Period during which position or interest was held
Steven Weigel		Officer	

Name	Address	Position and nature of any interest	Period during which position or interest was held
Timothy Walsh		Officer	

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☐ No
☒ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
Aetius Companies, LLC	EIN: 45-3856613

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
--------------------------	--

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **October 30, 2023**

/s/ Mark Cote

Signature of individual signing on behalf of the debtor

Mark Cote

Printed name

Position or relationship to debtor **CEO**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☐ No
☒ Yes

Statement of Financial Affairs Part 2:

Question 3:

ON BEHALF OF THE FOLLOWING:

105 - North Charleston Wings LLC only:

<u>Creditor Name/Address</u>	<u>Dates</u>	<u>Value</u>	<u>Reasons for Transfer</u>
Bottles Beverage	Various	\$ 10,048	Vendor - COGS
Columbia Meats Inc	Various	\$ 34,010	Vendor - COGS
Micky Finn's	Various	\$ 11,961	Vendor - COGS
SYSCO Columbia LLC	Various	\$ 82,377	Vendor - COGS

108 - Bluffton Wings LLC only:

<u>Creditor Name/Address</u>	<u>Dates</u>	<u>Value</u>	<u>Reasons for Transfer</u>
Columbia Meats Inc	Various	\$ 39,855	Vendor - COGS
Patels ABC LLC	Various	\$ 9,112	Vendor - COGS
SYSCO Columbia LLC	Various	\$ 93,400	Vendor - COGS

110 - Vista Wings LLC only:

<u>Creditor Name/Address</u>	<u>Dates</u>	<u>Value</u>	<u>Reasons for Transfer</u>
SYSCO Columbia LLC	Various	\$ 21,163	Vendor - COGS

114 - Anderson Wings LLC only:

<u>Creditor Name/Address</u>	<u>Dates</u>	<u>Value</u>	<u>Reasons for Transfer</u>
Greenville Meats Inc	Various	\$ 47,840	Vendor - COGS
KW Beverage (Budweiser)	Various	\$ 7,790	Vendor - COGS
SYSCO Columbia LLC	Various	\$ 89,649	Vendor - COGS

117 - Gastonia Wings LLC only:

<u>Creditor Name/Address</u>	<u>Dates</u>	<u>Value</u>	<u>Reasons for Transfer</u>
ABC Liquor Store	Various	\$ 14,393	Vendor - COGS
Columbia Meats Inc	Various	\$ 17,443	Vendor - COGS
Standard Distributors	Various	\$ 9,417	Vendor - COGS
Sysco Charlotte	Various	\$ 40,013	Vendor - COGS

118 - Greenville WWC LLC only:

<u>Creditor Name/Address</u>	<u>Dates</u>	<u>Value</u>	<u>Reasons for Transfer</u>
Green Co.	Various	\$ 9,942	Vendor - COGS
Greenville Meats Inc	Various	\$ 82,437	Vendor - COGS
KW Beverage (Budweiser)	Various	\$ 11,201	Vendor - COGS
Lee Distributors	Various	\$ 7,709	Vendor - COGS
Magnolia Park Greenville LLC		\$ 70,806	Rent
Micky Finn's	Various	\$ 23,449	Vendor - COGS
SYSCO Columbia LLC	Various	\$ 180,704	Vendor - COGS

119 - Raleigh Wings LLC only:

<u>Creditor Name/Address</u>	<u>Dates</u>	<u>Value</u>	<u>Reasons for Transfer</u>
------------------------------	--------------	--------------	-----------------------------

ABC Liquor Store	Various	\$ 15,368	Vendor - COGS
Brier Creek LP		\$ 69,685	Rent
LONG BEVERAGE	Various	\$ 16,771	Vendor - COGS
RH Barringer Distributing Co.	Various	\$ 11,321	Vendor - COGS
Sysco Charlotte	Various	\$ 127,538	Vendor - COGS

124 - Wild Wings of Charlotte LLC only:

<u>Creditor Name/Address</u>	<u>Dates</u>	<u>Value</u>	<u>Reasons for Transfer</u>
Sysco Charlotte	Various	\$ 17,931	Vendor - COGS

903 - Aetius Restaurant Holdings LLC only:

<u>Creditor Name/Address</u>	<u>Dates</u>	<u>Value</u>	<u>Reasons for Transfer</u>
Airgas National Carbonation	Various	\$ 11,338	TBU
Andrea Campoli	Various	\$ 12,250	TBU
ASC LLC	6/9/23	\$ 8,976	TBU
BCN Telecom Inc	Various	\$ 38,975	Internet Services
Charleston County Revenue Collections	Various	\$ 31,234	Taxes
Chris Mechanical LLC	Various	\$ 28,900	TBU
City of Gastonia	Various	\$ 10,540	TBU
City of Greenville	6/23/23	\$ 8,656	TBU
Direct TV	Various	\$ 23,818	TV Services
Dominion Energy	Various	\$ 24,262	Utilities
Duke Energy	Various	\$ 42,541	Utilities
Elaine Gardner	Various	\$ 27,097	TBU
Equitable Life Ins Co of America	Various	\$ 26,912	Insurance
Gaston County Tax Office	6/29/23	\$ 35,823	Taxes
Harford Mutual Insurance Company	7/14/23	\$ 20,914	Insurance
hrEDGE CONSULTING	Various	\$ 11,500	TBU
IPFS Corporation	Various	\$ 70,106	Insurance
Khayat Law Firm Inc.	7/13/23	\$ 19,711	Legal Services
Lockton Companies	5/25/23	\$ 40,000	Insurance
NC Department of Revenue	Various	\$ 104,309	Taxes
NCR Corporation	Various	\$ 28,869	TBU
Palmetto Electric	Various	\$ 10,596	Utilities
Punchh Inc	Various	\$ 9,560	TBU
Sandy Springs Water District, Inc.	4/26/23	\$ 15,398	Utilities
SC Department of Revenue	Various	\$ 238,691	Taxes
Smith Gambrell & Russell LLP	Various	\$ 16,051	Legal Services
SouthPark Towers PropCo LLC	7/18/23	\$ 10,323	Rent
STORE Master Funding VII LLC	Various	\$ 156,000	Rent
Summit Consulting LLC	6/26/23	\$ 23,125	TBU
The 20 LLC	7/17/23	\$ 9,041	TBU
The Charleston Group	6/9/23	\$ 23,000	TBU
United Healthcare	Various	\$ 88,844	Insurance
Wake County Tax Administration	4/24/23	\$ 30,993	Taxes
Worldpay	4/30/23	\$ 10,000	TBU

Statement of Financial Affairs Part 2

Question 4:

<u>Insider Name/Address</u>	<u>Dates</u>	<u>Value</u>	<u>Reasons for Transfer</u>
Axum Capital Partners	5/25/23	\$ 605	1st Half System Installation
	5/31/23	\$ 1,150	Final System Installation
	6/1/23	\$ 90	6 Fobs
	7/1/23	\$ 121	TV/Internet
	7/1/23	\$ 5,030	Prorated June Rent
	7/1/23	\$ 5,203	July Rent
	6/24/23	\$ 134	Printer cartridges
Axum Capital Partners	Various	\$ 12,332	Sublease expenses
Mark Cote	2022	\$ 5,361	Wages - Paycom
	01/11/2023	\$ 316	Wages - ADP
	01/11/2023	\$ 4,505	Wages - ADP
	01/25/2023	\$ 4,505	Wages - ADP
	02/08/2023	\$ 4,505	Wages - ADP
	02/08/2023	\$ 316	Wages - ADP
	02/22/2023	\$ 4,505	Wages - ADP
	03/08/2023	\$ 316	Wages - ADP
	03/08/2023	\$ 4,505	Wages - ADP
	03/22/2023	\$ 4,505	Wages - ADP
	04/05/2023	\$ 316	Wages - ADP
	04/05/2023	\$ 4,505	Wages - ADP
	04/19/2023	\$ 4,505	Wages - ADP
	05/03/2023	\$ 357	Wages - ADP
	05/03/2023	\$ 4,505	Wages - ADP
	05/17/2023	\$ 4,505	Wages - ADP
	05/31/2023	\$ 4,505	Wages - ADP
	06/14/2023	\$ 5,065	Wages - ADP
	06/14/2023	\$ 357	Wages - ADP
	06/28/2023	\$ 5,065	Wages - ADP
	07/12/2023	\$ 357	Wages - ADP
	07/12/2023	\$ 5,065	Wages - ADP
	07/26/2023	\$ 5,065	Wages - ADP
	08/09/2023	\$ 357	Wages - ADP
	08/09/2023	\$ 5,065	Wages - ADP
	11/02/2022	\$ 326	Wages - ADP
	11/02/2022	\$ 4,467	Wages - ADP
	11/16/2022	\$ 4,467	Wages - ADP
	11/30/2022	\$ 4,467	Wages - ADP
	12/14/2022	\$ 322	Wages - ADP
	12/14/2022	\$ 4,467	Wages - ADP
	12/28/2022	\$ 4,467	Wages - ADP
Mark Cote	Various	\$105,919	Wages
Mark Cote	Oct '22	\$ 970	Reimbursed expenses
	Nov '22	\$ 564	Reimbursed expenses

	Dec '22	\$ 1,994	Reimbursed expenses
	Dec '22 #2	\$ 751	Reimbursed expenses
	Jan '23	\$ 1,392	Reimbursed expenses
	Feb '23	\$ 1,856	Reimbursed expenses
	Mar '23	\$ 546	Reimbursed expenses
	Apr '23	\$ 1,548	Reimbursed expenses
	May '23	\$ 2,255	Reimbursed expenses
	Jun '23	\$ 2,078	Reimbursed expenses
Mark Cote	Various	\$ 13,954	Reimbursed expenses

Expense Reimbursement Schedule for Denis Ackah-Yensu

Date	Vendor	Credit Card Charges	Payment on Credit Card
7/21/2022			
7/22/2022	Sysco	12,350.00	
7/28/2022			
7/28/2022	Sysco	5,800.00	
7/28/2022	Melio Supporting STR646-6654684 AR	324.80	
7/28/2022	Melio Supporting STR646-6654684 AR	11,200.00	
8/2/2022	Credit Card Payments		(86,730.65)
8/2/2022	Credit Card Payments		86,730.65
8/2/2022	CT Corp - Aetius Holdings	515.00	
8/5/2022	CSC - Aetius Intermediate	515.00	
8/5/2022			
8/8/2022	Fish Window Cleaning SC 803-902-2223	864.00	
8/9/2022			
8/12/2022			
8/15/2022			
8/18/2022			
8/19/2022			
8/19/2022	Duke Energy	1,707.77	
8/19/2022	Melio Supporting STR646-6654684 AR	18,289.08	
8/19/2022	Melio Supporting STR646-6654684 AR	530.38	
8/20/2022	Duke Energy	10,008.50	
8/20/2022	Duke Energy	6,141.48	
8/20/2022	South Island Public	745.22	
8/22/2022			
8/23/2022			
8/23/2022	Direct TV	20,000.00	
8/23/2022	Trash Gurl	2,060.85	
8/23/2022	Palmetto Electric	9,503.00	
8/24/2022	Georgia Power	392.08	
8/24/2022	Georgia Power	1,000.00	
8/24/2022	Georgia Power	999.97	
8/24/2022	Georgia Power	999.99	
8/24/2022	Georgia Power	999.98	
8/26/2022			
8/26/2022	Sani-Can	2,800.00	
8/27/2022	Charter Services	313.55	
8/29/2022			
8/29/2022	On Call Plumbing & HVAC	2,695.00	
8/29/2022	Credit Card Payments		(120,000.00)
8/30/2022			
8/30/2022	Town of Hilton Head	2,696.01	
8/30/2022	Town of Hilton Head	2,184.91	
8/30/2022	Town of Hilton Head	2,049.26	

8/31/2022	Southern Climate Solution	5,000.00	
8/31/2022	Upstate Climate Solutions	5,000.00	
9/1/2022			
9/2/2022			
9/7/2022	Trash Gurl	515.00	
9/9/2022			
9/12/2022			
9/13/2022			
9/13/2022	Southern Climate Solution	14,420.00	
9/15/2022			
9/15/2022	Credit Card Payments		(53,574.30)
9/15/2022	MSFT	955.51	
9/15/2022	Spectrum	197.36	
9/16/2022	Credit Card Payments		(115.12)
9/16/2022	Credit Card Payments		(115.12)
9/16/2022			
9/17/2022	Beaufort County RE Tax	47,976.34	
9/17/2022	City of Rock Hill	5,548.74	
9/19/2022	Whaley Food Service	2,985.00	
9/19/2022	Direct TV	6,500.00	
9/20/2022	Duke Energy	3,803.72	
9/20/2022	Duke Energy	5,168.81	
9/22/2022			
9/22/2022	Sysco	11,000.00	
9/26/2022			
9/26/2022			
9/26/2022	Beaufort County RE Tax	29,284.43	
9/27/2022	Greenville Meats	10,000.00	
9/27/2022	Georgia Power	755.18	
9/27/2022	Georgia Power	999.98	
9/27/2022	Georgia Power	999.99	
9/27/2022	Georgia Power	1,000.00	
9/28/2022	Greenville Meats	9,000.00	
9/28/2022	Ambos Seafood	21,630.00	
9/28/2022	Cape Fear PUA	286.00	
9/28/2022	Cape Fear PUA	302.99	
9/28/2022	Cape Fear PUA	303.00	
9/29/2022	Ford and Harrison LLP	8,905.00	
9/30/2022			
9/30/2022	Whaley Food Service	2,984.31	
10/3/2022	City of Greenville (Magnolia Hospitality Tax)	35,003.95	
10/3/2022	City of Greenville (Magnolia Hospitality Tax)	927.61	
10/5/2022	Corporation services	50.00	
10/6/2022			
10/6/2022	Ambos Seafood	12,655.50	
10/6/2022	Greenville Meats	12,468.00	
10/7/2022			

10/7/2022	MSFT	12.27	
10/7/2022	MSFT	516.00	
10/7/2022	Melio Supporting STR646-6654684 AR	18,502.58	
10/7/2022	Melio Supporting STR646-6654684 AR	536.57	
10/9/2022	Greenville Meats	10,000.00	
10/11/2022			
10/11/2022	Caromont Health Gastonia	5,556.68	
10/12/2022	811 Hilton Head Regl Med	92.21	
10/12/2022	Greenville Meats	10,000.00	
10/13/2022			
10/13/2022	South Island Public	1,503.71	
10/14/2022			
10/14/2022	Southern Climate Solution	2,783.00	
10/14/2022	Abode Home Design	2,267.28	
10/15/2022	Greenville Meats	6,464.40	
10/23/2022	Credit Card Payments		(5,000.00)
10/26/2022	Public Storage	808.50	
10/27/2022			
10/28/2022			
10/28/2022	Greenville Meats	5,000.00	
10/31/2022			
11/1/2022			
11/3/2022			
11/3/2022			
10/28/2022	TeamViewer Business	500.64	
11/3/2022	Propane Serv (Amerigas)	8,723.13	
11/3/2022	Propane Serv (Amerigas)	1,484.83	
11/4/2022			
11/4/2022			
11/4/2022			
11/4/2022	Unifour Fire & Safety	4,261.67	
11/7/2022			
11/7/2022	MSFT	516.00	
11/7/2022	MSFT	8.00	
11/8/2022			
11/9/2022			
11/9/2022			
11/9/2022	Facebook	418.23	
11/10/2022			
11/11/2022	Plumbing Pro	902.00	
11/15/2022	Facebook	900.00	
11/16/2022			
11/16/2022			
11/17/2022			
11/18/2022	Facebook	900.00	
11/20/2022	Facebook	900.00	
11/20/2022	Wild Wing Café Anderson	7.28	

11/22/2022			
11/22/2022	Dumpster Depot	3,467.29	
11/25/2022			
11/28/2022			
11/30/2022			
12/14/2022			
12/14/2022			
12/14/2022			
12/16/2022			
12/20/2022			
12/27/2022			
12/30/2022			
12/30/2022			
1/5/2023			
1/6/2023			
1/10/2023			
1/10/2023			
1/11/2023			
1/12/2023			
1/12/2023			
1/13/2023			
1/17/2023			
1/18/2023	Staples	100.82	
1/20/2023			
1/20/2023	Duke Energy (Raleigh)	5,969.43	
1/21/2023	Greenville Meats	71,400.00	
1/18/2023	Charlotte Fire Marshal's Office	403.65	
1/24/2023			
2/17/2023	City Wide Exterminating	930.00	
6/30/2023	Credit Card Payments		(114,755.39)
6/30/2023	Credit Card Payments		(86,035.90)
6/30/2023	Credit Card Payments		(115,990.50)
Total Post Petition One Year LookBack (7-20-22 to 7-19-23)		\$ 540,148	\$ (495,586)

Expense Reimbursement Schedule for Muhsin Muhammad

Date	Vendor	Credit Card Charges	Payment on Credit Card
8/9/2022	Southern Climate Solutions	19,420.00	
9/2/2022	Roto Rooter of Savannah	95.29	
9/3/2022	Roto Rooter of Savannah	350.90	
9/6/2022	Roto Rooter of Savannah	638.38	
9/16/2022	SIR Raleigh Electric	1,476.88	
9/20/2022	Roto Rooter of Savannah	467.13	
9/22/2022	SYSCO	25,000.00	
10/3/2022	Roto Rooter of Savannah	1,913.80	
10/13/2022	Roto Rooter of Savannah	1,163.54	
11/30/2022	Roto Rooter of Savannah	391.92	
	Payment to Muhsin for Credit Card Charges		
6/29/2023	Reimbursement		(50,000.00)
Total Post Petition One Year LookBack (7-20-22 to 7-19-23)		\$ 50,917.84	\$ (50,000.0)

44837 Roto Rooter of Savannah

Plumbing

**United States Bankruptcy Court
Western District of North Carolina**

In re **Aetius Restaurant Holdings, LLC**

Debtor(s)

Case No. **23-30474**

Chapter **11**

VERIFICATION OF CREDITOR MATRIX - AMENDED

I, the CEO of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **October 30, 2023**

/s/ Mark Cote

Mark Cote/CEO

Signer/Title

1 Call Plumbing, Inc.
7407 Reedy Creek Rd
Charlotte, NC 28215

1188 Centre HPR
C/O IMC Resort Services Inc
PO Box 95187
Las Vegas, NV 89133

485 MEDIA, LLC
10612 D Providence Rd # 716
Charlotte, NC 28277

A & A Refrigeration LLC
110 Cherry Hill Avenue
Goose Creek, SC 29445

A Perfect Pressure Cleaning, Inc.
Pedro Abdiel Diaz, Registered Agent
217 DAVENTON RD
Pelzer, SC 29669

A S Private Security LLC
17 Beacon Lane
Port Wentworth, GA 31407

AARK Hospitality TK, Inc.
6 Red Gravel Circle
Sicklerville, NJ 08081

ACR Master Locksmith LLC
7804 Fairview Road, #342
Charlotte, NC 28226

Action Graphics and Signs Inc
112 Wayne Avenue
Chesapeake, VA 23320

ADP SCREENING & SELECTION SERVICES
301 Remington Street
Fort Collins, CO 80524

ADP, Inc.
One ADP Boulevard
Roseland, NJ 07068

Advanced Disposal
PO Box 74008047
Chicago, IL 60674-8047

AETIUS COMPANIES, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

AETIUS FRANCHISING, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

AETIUS INTERMEDIATE COMPANY, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

AETIUS RESTAURANT GROUP, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

Agency Zero LLC
24657 Foothills Drive N
Golden, CO 80401

Aiken County Treasurer
PO Box 919
Aiken, SC 29802

Airgas National Carbonation
3101 Stafford Dr
Charlotte, NC 28208

AIRGAS USA, LLC
PO Box 9249
Marietta, GA 30065-2249

Alarm, Fire & Security, LLC
PO Box 2072
Hilton Head Island, SC 29910-2072

Alcohol Beverage Logistical Service, LLC
2822 Liatris Lane
Charlotte, NC 28213

Altus Receivables Management
2121 Airline Dr, Suite 250
Metairie, LA 70001

Ambos Seafoods LLC
PO Box 15242
Savannah, GA 31401

America's Favorite Wing Caf
c/o Kim and Lahey Law Firm LLC
3620 Pelham Road, PMB #213
Greenville, SC 29615

American Express
P.O. Box 981535
El Paso, TX 79998-1535

Anderson County Treasurer
PO Box 1658
Anderson, SC 29622

ANDERSON WINGS, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

Andrea Campoli
Rocket Entertainment & Music Booking
7267 Sandy Creek Drive
Raleigh, NC 27615

ARC NWNCHSC0001 LLC
c/o Corportion Service Company
508 Meeting Street
West Columbia, SC 29169

Armstrong Transfer & Storage Co Inc
4400 Westinghouse Blvd
Charlotte, NC 28273

ARS Rescue Rooter
2548 Oscar Johnson Drive
N. Charleston, SC 29405

ASC LLC
8151 Webbbs Road
Denver, NC 28037

ASCAP
Attn: Account Services
PO BOX 331608
Nashville, TN 37203-7515

AT&T
PO Box 105262
Atlanta, GA 30348-5262

ATIS Elevator Inspections LLC
PO Box 790379
St. Louis, MO 63179-0379

Authentic Elite Power Wash
2631 Rufus Ratchford Rd
Gastonia, NC 28056

AW Billing Services LLC
4431 North Dixie Highway
Boca Raton, FL 33431

BACKFLOW PREVENTION
PO Box 667
McDonough, GA 30253

Barmalade LLC
190 E. Stacy Road Suite 306
Allen, TX 75002

BCBS Management Inc
Supporting Strategies Charlotte
2405 Gateway Ln
Lincolnton, NC 28092

BCN Telecom Inc
PO Box 842840
Boston, MA 02284

BEAT THE HEAT
7912 OLDE POND RD
Wilmington, NC 28411

Beaufort County Treasurer's Office
PO BOX 105176, Drawer 1228
Atlanta, GA 30348-5176

Beaufort Design Build LLC
2 Fire Station Lane
Seabrook, SC 29940

BeerBoard
US Beverage Net, Inc.
225 W Jefferson St
Syracuse, NY 13202

Belmont Fire & Safety Products, LLC
PO Box 928
Belmont, NC 28012

Best There Is/Scot Mann
1274 Old Kimbill Trail
Aiken, SC 29805

Beverage Control Inc
5215 South Royal Atlanta Drive
Tucker, GA 30084

Bigart Ecosystems LLC (Wisetail)
5301 Riata Park Court F
Austin, TX 78727

BJWSA
PO Box 602919
Charlotte, NC 28260

Black Box Intelligence
c/o TDn2K, LLC
14785 Preston Rd #290
Dallas, TX 75254

Blair Elementary PTA
6510 Market Street
Wilmington, NC 28405

Blanchard Refrigeration Contractors Inc
DBA Rich's Heating & Air Conditioning
109 W Church Street
Rose Hill, NC 28458

Blossman Gas & Appliance
6109 Wilkinson Blvd
Belmont, NC 28012

BLUFFTON ELECTRIC
266 RED CEDAR STREET
Bluffton, SC 29910

BLUFFTON WINGS, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

BMI - Broadcast Music Inc
7 World Trade Center
250 Greenwich Street
New York, NY 10007-0030

Bonnie Hutchison
Tri-State Plumbing & Electrical
505 Poinsett Hwy
Greenville, SC 29609

Brian Peck
18 Gladesworth Dr
Greenville, SC 29615

Brian Watts
9109 Marion Oaks Dr
Charlotte, NC 28215

Brier Creek LP
Attn: Craig Farkas
1900 Avenue of the Stars, Suite 2400
Los Angeles, CA 90067

Brinks Incorporated
7373 Solutions CTR.
Chicago, IL 60677-7003

Brooke R. Ashman
615 Red Cross St
Apt A
Wilmington, NC 28401

Butch Johnston
1041 Willow Grove Ln
York, SC 29745

C.E. Holt Refrigeration
3316 Gibbon Rd
Charlotte, NC 28269

Cape Fear Commercial
102 Autumn Hall Drive Suite 210
Wilmington, NC 28403

Cape Fear Public Utility Authority
235 Government Center Drive
Wilmington, NC 28403

Capital Waste Services
PO Box 148
Columbia, SC 29202

Capitol Coffee Systems
1113 Capital Blvd
Raleigh, NC 27603

Card Marketing Services llc
2026 Johnson Industrial Blvd
Nolensville, TN 37135

Cardlytics
75 Remittance Drive Dept 3247
Chicago, IL 60675-3247

Carlos Odell Scott
2812 College Farm Rd
Mooresboro, NC 28114

Carolina Hotwash
PO Box 81001
Charleston, SC 29416

CBG Draft Services NC LLC
1720 Toal St
Charlotte, NC 28206

CC Landfall LLC
1111 Metropolitan Avenue
Suite 700
Charlotte, NC 28204

Charleston County Revenue Collections
4045 Bridge View Drive, #B110
North Charleston, SC 29405

Charleston Water Systems
PO Box 568
Charleston, SC 29402-0568

Charlotte Alarm
PO Box 602486
Charlotte, NC 28260-2486

Charlotte IT Solutions
PO Box 31066
Charlotte, NC 28231-1066

Charlotte Knights
324 S. MINT STREET
Charlotte, NC 28202

CHARLOTTE UPTOWN WINGS LLC
210 East Trade Street, Suite D-262
Charlotte, NC 28202

Charter Communications
PO Box 6030
Carol Stream, IL 60197-6030

Chatham County Health Department
PO Box 14257
Savannah, GA 31416

CHATMETER INC
PO BOX 675307
Detroit, MI 48267-5307

Christine Harder
201 Lakeshore Drive
Gaffney, SC 29341

Christopher Baxter
PO Box 872
Lowell, NC 28098

Chuck Eaton Photographers
210 Park Square Place
Matthews, NC 28105

CIGNA HealthCare
5476 Collections Center Dr
Chicago, IL 60693-0547

Cintas Corporation
6800 Cintas Blvd
Cincinnati, OH 45262

Cintas Corporation No. 2
PO Box 21029
Winston Salem, NC 27120

Cintas Fire 636525
PO Box 636525
Cincinnati, OH 45263-6525

City Electric Supply Co
PO Box 131811
Dallas, TX 75313-1811

City of Aiken
PO Box 2458
Aiken, SC 29802

City of Charlotte (Water)
Billing Center
PO Box 1316
Charlotte, NC 28201

City of Columbia
Business License Division
PO Box 7997
Columbia, SC 29201

City of Dunwoody
4800 Ashford Dunwoody Road
Atlanta, GA 30338

City of Gastonia
Utilities PO Box 580068
Charlotte, NC 28258-0068

City of Greenville
Business License-Revenue Department
PO Box 2207
Greenville, SC 29601

City of Raleigh
PO BOX 71081
Charlotte, NC 28272-1081

City of Rock Hill-Utilities
PO Box 63039
Charlotte, NC 28263-3039

City of Savannah
PO Box 1027
2 East Bay Street
Savannah, GA 31401

City of Wilmington
PO Box 81010
Wilmington, NC 28402

City Wide Exterminating
907 West Main Street
Locust, NC 28097

City-County Tax Collector
PO Box 32728
Charlotte, NC 28232-2728

Classic Vinyl Repair Inc.
419 N. College Rd.
Wilmington, NC 28405

CLEAN FLO SEWER AND DRAIN
100 CONSTRUCTION WAY
Unit 7
Anderson, SC 29625

Coastal Empire Fire & Security Corp
2431 Habersham St.
Savannah, GA 31401

Coca-Cola North America
PO Box 102703
Atlanta, GA 30368-2703

COLUMBIANA WINGS, LLC
1150 Bower Parkway
Columbia, SC 29212

Comcast Cable
PO Box 71211
Charlotte, NC 73736-7728

COMMERCIAL DOOR WORX INC
227 W 4th St
Charlotte, NC 28202

Commercial Refrigeration Company INC
1133 Commercial Ave
Charlotte, NC 28205

Compeat Restaurant Mgmt Systems Corp
11500 Alterra Parkway, Ste 130
Austin, TX 75758

Complete Pymt Recovery
PO BOX 30184
Tampa, FL 33630-3184

Comporium
PO Box 1042
Rock Hill, SC 29731-7042

Corley Plumbing Air Electric
8501 Pelham Road.
Greenville, SC 29615

Corporate Pride LLC
1809 E Broadway St
Oviedo, FL 32765

Corporate Services Consultants, LLC
PO BOX 1048
Dandridge, TN 37725

Courtyard By Marriot Atlanta McDonough
115 Mill Road
McDonough, GA 30253

Cozzini Bros., Inc.
350 Howard Ave.
Des Plaines, IL 60018

CPI Security Systems Inc.
4200 Sandy Porter Road
Charlotte, NC 28273

CSC Global
PO BOX 7410023
Chicago, IL 60674-5023

CT Corporation
PO Box 4349
Carol Stream, IL 60197-4349

DALE HARRIS GASKET GUY
1608 N. WOODSTREAM RD
Columbia, SC 29212

Dallas R. Courtney Jr.
1218 13th Ave. NE
Hickory, NC 28601

DAVID JENNINGS
4107 Kettering Dr
Durham, NC 27713

David Matthew Vaine
14 Carmel Dr
Statesboro, GA 30458

De Lage Landen Financial Services Inc
PO BOX 41602
Philadelphia, PA 19101-1602

Deerwood Park North Owners Association
c/o Gerald Dake & Associates
13617 Atlantic Blvd
Jacksonville, FL 32225

Dekalb County Tax Commissioner
PO Box 100004
Decatur, GA 30031-7004

Dekalb Enviromental Health
445 Winn Way, Suite 320
Decatur, GA 30030

Demitri's Gourmet Mixes Inc
PO Box 84123
Seattle, WA 98124

Department of the Navy
9053 First St, Suite 100
Norfolk, VA 23511-3605

DESOTO PROPERTIES, LLC
400 Mall Blvd, Suite M
Savannah, GA 31406

Destini Brown
330 Gatesbrook Dr
Blythewood, SC 29016

Devin Anthony Greenhill
104 Teal Ct
Summerville, SC 29483

Devon Kendall
265 Legacy Dr
Youngsville, NC 27596

Dhanraj N Emanuel
8 Dundas Circle Suite F
Greensboro, NC 27407

Dilworth Paxson LLP
1500 Market St.
Suite 3500E
Philadelphia, PA 19102

Direct Connect Plumbing LLC
4363 Shallowford Industrial Pkwy Ste A
Marietta, GA 30066

Direct TV
PO Box 105249
Atlanta, GA 30348-5249

Dixie Lock & Safe of Aiken
1006 Owens St
Aiken, SC 29803

Dominion Energy
PO Box 100255
Columbia, SC 29202

DOOR MEDIC
PO BOX 1642
Belmont, NC 28012

DOVE ELECTRICAL SERVICES INC.
PO BOX 19424
Charlotte, NC 28219-9424

Drury Inn & Suites CLT Arrowood
8925 Red Oak Blvd
Charlotte, NC 28217

Duane L. Huffman
c/o William Walker
212 North Laura Street
Jacksonville, FL 32202

Dumpster Depot
262 Eastgate Drive, Suite 336
Aiken, SC 29803

DUNWOODY WINGS LLC
4768 Ashford Dunwoody Road
Atlanta, GA 30338

Duval County Tax Collector
PO Box 44009
Jacksonville, FL 32231-4009

East Coast Solutions LLC
18357 Seven Creeks Highway
Tabor City, NC 28463

Ecolab Ecosure
26397 Network Place
Chicago, IL 60673-1263

Ecolab Pest Elimination Inc.
26252 Network Place
Chicago, IL 60673-1262

Ecolab, Inc.
PO Box 32027
New York, NY 10087-2027

Edge Air Conditioning Corp
PO Box 80
Pooler, GA 31322

EEC Acquisition LLC
Smart Care Equipment Solutions
PO Box 74008980
Chicago, IL 60674

Emma Bolen
902 JASMINE COVE CIRCLE
Simpsonville, SC 29680

Environmental Remedies LLC
452 Sawtell Ave SE
Atlanta, GA 30315

Eplee & Associates Directories LLC
PO BOX 27045
Greenville, SC 29616

Equitable Financial Life Insurance Compa
2999 North 44th Street, Suite 250
Phoenix, AZ 85018

Equitable's Employee Benefits Group
8501 IBM Dr., Ste. 150-B
Charlotte, NC 28262

eSite Analytics Inc.
528 Johnnie Dodds Blvd, Suite 201
Mt Pleasant, SC 29464

Factory Cleaning Equipment Inc
1578 Beverly Court Ste A
Aurora, IL 60502

FAST LOCKSMITH CHARLESTON
215 Promenade Vista Street #3056
Charleston, SC 29412

Fintech
7702 WOODLAND CENTER BLVD
STE. 50
Tampa, FL 33614

Fire Tech of the Lowcountry, LLC
Thomas Fabian Cambron Jr
23 Martingale W
Bluffton, SC 29910

FIRST STOP HEALTH, LLC
233 NORTH MICHIGAN AVE, UNIT 1400
Chicago, IL 60601

FIS Global / WorldPay
347 Riverside Avenue
Jacksonville, FL 32202

Fish Window Cleaning
2735 Old Atlanta Rd, Ste E
PO BOX 171
Griffin, GA 30223

FL Department of Revenue
P.O. Box 7443
Tallahassee, FL 32314-7443

FLAME ON COOL OFF (FOCO), LLC
PO BOX 25854
Raleigh, NC 27611-5854

Flour-Town Holdings LLC
92 Chadwick Street
Charleston, SC 29407

FOH AND BOH INC
3802 Woodmont Ln
Nashville, TN 37215

Freedom Plumbing INC
5569 Platt Springs Rd
Lexington, SC 29073

Frontline Insurance
PO Box 958405
Lake Mary, FL 32795-8405

Fusion Systems LLC
119 N MARKLEY ST
Greenville, SC 29601

FuturePlan by Ascensus
200 Dryden Road, Suite 4000
Dresher, PA 19025

GALVEZ PAINTING AND REMODELING LLC
98 UNION CEMETERY RD
Hilton Head, SC 29926

GAR Products
430 Oberlin Ave. S.
Lakewood, NJ 08701

Garrett Huffman
2525 Cypress Oak Ln
Gastonia, NC 28056

Gars Incorporated
50 Grayson Industrial Pkwy
Grayson, GA 30017

Gas South
PO BOX 530552
Atlanta, GA 30353-0552

Gasket Guy of Charlotte (S-Corp)
10106 Sardis Oaks Rd
Charlotte, NC 28270

Gaston County Tax Office
128 W. Main Ave.
Gastonia, NC 28052

GASTONIA WINGS LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

Genovese Joblove & Battista
100 Southeast Second St 44th Floor
Miami, FL 33131

Georgia Air & Refrigeration, Inc.
c/o Andrew J. Becker
5775 North Point Pkwy., Ste. 284
Alpharetta, GA 30022

Georgia Department of Revenue
Taxpayer Services Division
PO BOX 105499
Atlanta, GA 30348-5499

Georgia Power
96 Annex
Atlanta, GA 30396

GFL Enviromental Corp
PO Box 791519
Baltimore, MD 21279-1519

Google
1600 Amphitheatre Parkway
Mountain View, CA 94043

Great America Financial Services Corp
PO Box 660831
Dallas, TX 75266

GREATER CHARLOTTE REFRGERATION
6120-J Brookshire Blvd.
Charlotte, NC 28216

Greater Columbia Chamber of Commerce
1225 Lady Street, Suite 100
Columbia, SC 29201

Greenville County Tax Collector
301 University Ridge, Ste 700
Greenville, SC 29601-3659

Greenville Water Systems
PO Box 687
Greenville, SC 29601

GREENVILLE WWC LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

Groove Town Assault
53 Wax Myrtle Court
Hilton Head Island, SC 29926

GRP City Market LLC
198 East Bay St.
Suite 300
Charleston, SC 29401

Hall Electrical Contractor LLC
524 Pennwood Dr.
Spartanburg, SC 29306-4252

Hargray Telephone
PO Box 100116
Columbia, SC 29202-3116

Henry County Chamber of Commerce
1709 Highway 20 West
McDonough, GA 30253

Henry County Health Department
137 Henry Parkway
McDonough, GA 30253

HIGHSMITH CONSTRUCTION INC.
4 EXECUTIVE PARK ROAD
Hilton Head Island, SC 29928

Hilton Garden-Rock Hill
650 Tinsley Way
Rock Hill, SC 29730

HLS Precision Welding
2818 Pervis Rd
Durham, NC 27704

Home2 Suites Atlanta South McDonough
60 Mill Road
McDonough, GA 30253

HomeTrust Bank
10 Woodfin Street
PO Box 10
Asheville, NC 28802

Homewood Suites - Greenville SC
102 Carolina Point Parkway
Greenville, SC 29607

HonorBuilt LLC
2010 Avalon Parkway, Suite 400
McDonough, GA 30253

Hoodz of The Triangle
5817 Triangle Drive
Suite 101
Raleigh, NC 27617

hrEDGE CONSULTING
702 LAFAYETTE BLVD
Oldsmar, FL 34677

iHeartMedia
PO Box 406372
Atlanta, GA 30384

Impact Fire Services
340 Crompton St.
Charlotte, NC 28273

Impact Fire Services
PO Box 1307
Morrisville, NC 27560

InMoment Inc.
950 East Paces Ferry Road NE
Suite 2250
Atlanta, GA 30326

Innovate Mobile LLC
2175 Cumbre Pl
El Cajon, CA 92020

Innovation & Design in Architecture
115 Pine Ave.
Suite 250
Long Beach, CA 90802

Innovation & Design in Architecture
1712 Euclid Avenue
Charlotte, NC 28203

Integrated Technology Concepts, LLC
164 Market St Ste 245
Charleston, SC 29401

Integrated Technology Services, LLC
164 Market St, Suite 245
Charleston, SC 29401

Integration Network LLC
PO Box 668
Chandler, AZ 85244

Internal Revenue Service
PO Box 9941
STOP 5500
Ogden, UT 84409

Internal Revenue Service
Attn: Centralized Insolvency Operation
PO Box 7346
Philadelphia, PA 19101-7346

Intracoastal Fire Protection, Inc.
22 Holland Drive
Castle Hayne, NC 28429-5912

Island Pest Control, Inc.
142 Island Dr.
Hilton Head Island, SC 29926

ITW Food Equipment Group LLC
Hobart Services
PO BOX 2517
Carol Stream, IL 60132-2517

J.E. S. Equipment Sales & Service
19 Midway Dr.
Abbeville, SC 29620

JAC Services LLC
107 Elks Lodge Lane
Summerville, SC 29483

JACKSONVILLE WWC, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

Jacob Bornman
213 Circle Drive, Lot 6
Pendleton, SC 29670

James M. Brannigan
8305 Bailey Mill Rd
Gainesville, GA 30506

James Reeves
3003 Starboard Dr
Augusta, GA 30909

Jason S Valakis
2309 Kings Gate Ln
Mount Pleasant, SC 29466

Jay A. Hansel
Advanced Leather Care
308 Dogwood Ln
Lillington, NC 27546

JEA
PO BOX 45047
Jacksonville, FL 32232

Jenna Collins
1056 GLEN LAUREL DRIVE
Fort Mill, SC 29707

Jennifer Johnston
11036 Avalon Ridge Way
Winter Garden, FL 34787

JEREMY BRYANT MODZELEWSKI
7 CHINABERRY CIRCLE
HILTON HEAD ISLAND, SC 29926

Jeremy Johnson
115 Williams Rd
Thomaston, GA 30286

Joelle Milligan
309 Huntsman Dr
Goose Creek, SC 29445

John Hancock Life Insurance Company

Jordan Olshansky, Inc
38 Westgate Way
San Anselmo, CA 94960

Joshua Bowers
103 Genoa Ct
Greenville, SC 29611

Just Let Me Do It Commercial Services
803 Hillcrest St
Kannapolis, NC 28083

JW Shirtworks, LLC
1816 Belgrade Ave.
Suite D
Charleston, SC 29407

JW's Precision Lawn Care, LLC
220 Edna Ruth Lane
McDonough, GA 30253

Ken Hutchins
2217 Matthews Township Parkway
Suite D-179
Matthews, NC 28105

Kenneth Lee George
136 Keeper Lane
Aiken, SC 29803

Kenneth Wareham
3 White Hall Ct
Hilton Head Island, SC 29928

KEY FIRE PROTECTION ENTERPRISES, LLC
3200 MIKE PADGETT HWY
Augusta, GA 30906

KeyBank Real Estate Capital
895 Central Ave, Suite 600
Cincinnati, OH 45202

Kimball's Plumbing Heating Elec & AC LLC
1205 Pine Drive NW
Aiken, SC 29801

KMT Systems Inc.
2004 Henry Parkway Connector
McDonough, GA 30253

Lawn Lovers LLC
144 Kentucky Derby Dr
Clayton, NC 27520

Lee Brown
2311A Lumina Avenue North
Wrightsville Beach, NC 28480

Lexington County Treasurer's Office
212 S Lake Dr
Lexington, SC 29072

Lexington Insurance Company
99 High Street
Boston, MA 02110

Life Insurance Company of North America
PO Box 782447
Philadelphia, PA 19178-2447

Lockton Companies
3280 Peachtree Road NE, Suite 250
Atlanta, GA 30305

Loud Music Company, LLC
5500 Market St
Unit 140-B
Wilmington, NC 28403

Lowcountry Audio
945 Habersham Rd
Midway, GA 31320

M & D Pressure Washing
409 Elm Ave
Anderson, SC 29625

MadPark Designs
3809 Beam Road, Suite G
Charlotte, NC 28217

Magnolia Park Greenville LLC
20 South Clark Street, Suite 3000
Chicago, IL 60603

Main Street Development II, LLC
189 S Converse St
Spartanburg, SC 29306

Marlin Business Bank
2795 E Cottonwood Parkway Suite 120
PO Box 13604
Salt Lake City, UT 84121

Marsh Bissell Patrick II LLC
C/O Northwood Office LLC
11605 N. Community House Rd, Suite 600
Charlotte, NC 28277

Martintown Landco LLC
c/o Chelsea Waddell, RA
336 Georgia Avenue, Suite 106 #102
North Augusta, SC 29841

Mary Catherine Strickland
4101 Senegal Ct
North Charleston, SC 29420

Mastercard Corp
2000 Purchase Street
Purchase, NY 10577

Matt Shaver
Southern Solutions
7500 Babe Stillwell Farm Rd
Huntersville, NC 28078

Matthew Christian
2741 Jobee Dr
APT 3066
Charleston, SC 29414

Mecklenburg County Tax Collector
PO Box 71063
Charlotte, NC 28272-1063

Meetze Plumbing Company Inc
10009 Broad River Road
Irmo, SC 29063

Melissa Johnson
313 MOSES RHYNE DR
Mt Holly, NC 28120

MENUWORKS.COM
8 SUNBELT BUSINESS PARK DRIVE
Greer, SC 29650

Meridian Intelligent Systems
483 Commerce Park Dr. SE
Suite A
Marietta, GA 30060

Meridian Waste
PO Box 580231
Charlotte, NC 28258

METROGREENSCAPE INC
3026 Stewart Creek Blvd
Charlotte, NC 28216

Micah Bacon
116 SNEAD ROAD
Fort Mill, SC 29715

Michael & Sons Services
140 Dupree St.
Charlotte, NC 28208

Michael Ponder
5 Beau Ct
Beaufort, SC 29907

Michael T Amburgey - ExpReimb
1012 Council Fire Circle
Indian Trail, NC 28079

Microsoft 365
One Microsoft Way
Redmond, WA 98052

MIMEO.COM, INC.
PO BOX 654018
Dallas, TX 75265

Modern Plumbing Co.of Charlotte Inc.
513 Woodlawn St
Mount Holly, NC 28120

MomentFeed UB Inc.
c/o Uberall, Inc.
600 California St
San Francisco, CA 94108

Mowry Electric Inc
9347 Kent Ave
Huntersville, NC 28078

MR. ROOTER
PO BOX 369
Oak Island, NC 28465-6853

Mr. Rooter Plumbing
3330 Marathon Ct, Ste B
North Charleston, SC 29418

Mr. Rooter Plumbing of Greenville
1341 Rutherford Road
Greenville, SC 29609

Multi Unit Analytics, LLC
679 Fraser St SE
Atlanta, GA 30315

Music Will (fka Little Kids Rock Inc.)
PO Box 43369
Montclair NJ 07043, NJ 07043

My Jacksonville Landscaper
1719 Penman Rd
Jacksonville Beach, FL 32250

Nateara Glover
1237 Sumner Ave, Unit D11
29406

Nateara Glover
c/o India D. Shaw
Poulin Willey Anastopoulo, LLC
32 Ann Street
Charleston, SC 29403

NC Department of Labor
Budget and Management Division
1101 Mail Service Center
Raleigh, NC 27699-1101

NC Department of Revenue
PO Box 25000
Raleigh, NC 27640

NC Labor Law Poster Service
4501 New Bern Ave, Suite 130
Raleigh, NC 27610-1550

NCR CORP.
864 Spring St NW
Atlanta, GA 30308

New Hanover County Tax Office
PO Box 18000
Wilmington, NC 28406

New Market Waste Solutions LLC
PO Box 603843
Charlotte, NC 28260-3843

Nobody Entertainment LLC
200 Brushy Creek Road
Easley, SC 29642

North Charleston Sewer District
PO BOX 63009
North Charleston, SC 29419-3009

NORTH CHARLESTON WINGS, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

OBCO Corp
PO Box 61119
North Charleston, SC 29419

Old Forum LLC
9224 Kings Parade Blvd, Suite 2101
Charlotte, NC 28273

Old Forum LLC
2127 Ayrsley Blvd., Suite 302
Charlotte, NC 28273

Olo Inc.
285 Fulton St, Floor 82
New York, NY 10007

On Call Plumbing, Heating & Air (Corp)
3770 Fernandina Rd.
Columbia, SC 29210

ONE LOCKSMITH
4626 KETTLEWELL RDG
Rock Hill, SC 29732

Orange Door Music Video, Inc.
1860 Chicago Ave
Ste G7
Riverside, CA 92507

Orkin
6650 Rivers Avenue
Charleston, SC 29406

Palmetto Electric
PO Box 530812
Atlanta, GA 30353-0812

Palmetto Utilities, Inc.
1713 Woodcreek Farms Rd, Suite A
Elgin, SC 29045

Panthers Football
800 South Mint Street
Charlotte, NC 28202

PARAGON PROPANE
PO BOX 77724
Charlotte, NC 28271

Patrick Cristaldi
23 South Forest Beach Dr
Apt 284
Hilton Head, SC 29928

Pearson Heating & Air LLC
357 South Ave.
Spartanburg, SC 29306

Peevey Inc. (Roto-Rooter Charleston)
3630 State Rd. S-10-1024
Johns Island, SC 29455

Phoenix Signs
2940 Champaign St.
Charlotte, NC 28210

Piedmont Natural Gas
PO Box 1246
Charlotte, NC 28201-1246

PINNACLE PRESSURE WASHING & PROPERTY
107 Brookmeade Dr.
Statesville, NC 28625

Pinnacle Roofing Contractors Inc
PO Box 56826
Jacksonville, FL 32241

Piper Plumbing LLC (S-Corp)
PO BOX 5264
Hilton Head, SC 29938

PipeTechs Plumbing Inc.
6600 Mt Herman Rd
Raleigh, NC 27617

Pitney Bowes Purchase Power
PO Box 371874
Pittsburgh, PA 15250-7874

Plumb Pro
111 A Lumber Lane
Goose Creek, SC 29445

Preferred Benefit Administrators
PO Box 916188
Longwood, FL 32791-6188

Premier Grease Inc
PO Box 3535
Alpharetta, GA 30023

PricewaterhouseCoopers LLP
PO Box 932011
Altanta, GA 31193-2011

Pro Chef Inc
PO BOX 4057
Mooresville, NC 28117

Pro Disposal
5237 N Okatie Hwy
Ridgeland, SC 29936

PRO KITCHEN SALES AND SERVICE
2115 COMMERCE DRIVE
Cayce, SC 29033

PROSERVE FIRE PROTECTION INC.
4849 Linksland Drive
Holly Springs, NC 27540

PROSERVE HOOD & DUCT SERVICES
1000 North Main Street
Fuquay-Varina, NC 27526

Public Storage 25908
5607 S TRYON ST
Charlotte, NC 28217

Punchh Inc
PO Box 536257
Pittsburgh, PA 15253

Pye Barker Fire & Safety LLC
PO Box 503
Piedmont, SC 29673

Quality Electric Construction Inc.
726 Brogan Avenue
Anderson, SC 29625

Quality of Charleston
5524 Dutton Av
Unit B-8
North Charleston, SC 29406

RALEIGH WINGS, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

RAY GOODMAN
PO BOX 1225
Jonesboro, GA 30237

RC REFRIGERATION, LLC
13534 Plaza Rd. Ext
Charlotte, NC 28215

Ready Lock Inc
PO Box 2081
Cumming, GA 30028-2081

RECORDERS COURT OF CHATHAM COUNTY
133 MONTGOMERY ST
Room 308
Savannah, GA 31401

Records Reduction Inc
2032-F Independence Commerce Dr
Matthews, NC 28105

Refrigeration Heroes, Inc
426 S Buncombe Road
Greer, SC 29650

Regency Centers Corporation
3715 Northside Parkway NW, Suite 400
Atlanta, GA 30327

Regions Bank
1900 Fifth Avenue North
Birmingham, AL 35203

Republic Services #742 (125)
PO Box 9001099
Louisville, KY 40290-1099

Republic Services #800 (123)
For BFI Waste Services LLC
PO Box 9001099
Louisville, KY 40290-1099

Residence Inn Raleigh-Durham Airport
10600 Little Brier Creek
Raleigh, NC 27617

Restaurant365
500 Technology Dr, Suite 200
Irvine, CA 92618

REWARDS NETWORK ESTABLISHMENT SERVICES
540 W. MADISON ST, ST 2400
Chicago, IL 60661

Richard Murdaugh
2003 Greene St
Columbia, SC 29205

Richard Turner Seekford
301 E. Bedford Rd
Wilmington, NC 28411

Richland County Taxes
PO Box 11947
Columbia, SC 29211

Richland County Treasurer
PO Box 11947
Columbia, SC 29211

RM Services & Sales Inc.
1930 Castle Hayne Rd, Ste 5
Wilmington, NC 28401

Roger West LLC
303 Perimeter Center North
Suite 300
Atlanta, GA 30346

Rolland Reash Plumbing Inc.
11606 Columbia Park Dr E
Jacksonville, FL 32258

Ronald Cureton
RC Refrigeration LLC
10407 Battle Ct
Charlotte, NC 28215

Rooter Man Plumbing
PO Box 30098
Charleston, SC 29417-0098

Roto Rooter
5672 Collections Center Drive
Chicago, IL 60693-0056

RSM US LLP
300 S Tryon St #1500
Charlotte, NC 28202

RWT Marketing, LLC
2508 Monarch Bay Dr
Las Vegas, NV 89128

Rytec Electric
100 Old Cherokee Road, Suite F #329
Lexington, SC 29072

Sandhill Center LLC
c/o Stiles Property Management
481 Town Center Place, Suite 2
Columbia, SC 29229

SANDHILL WING LLC
480 Town Center Place, Suite 2
Charlotte, NC 28229

Sandy Springs Water District, Inc.
6910 US-76
Pendleton, SC 29670

Sard & Leff, LLC
3789 Roswell Road NE
Atlanta, GA 30342

Sargent Pest Solutions
PO BOX 718
Mauldin, SC 29662

SAVANNAH WWC, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

SC Department of Revenue
ATTN: ACS COLLECTIONS
300A Outlet Pointe Blvd.
Columbia, SC 29210

SC Dept of Health and Enviro Control
2600 BULL ST
Columbia, SC 29201

SC Dept. Rev. Alcohol Licensing
P.O. Box 125
Columbia, SC 29214-0907

Scott Rule
219 Newport Dr
Jacksonville, NC 28540

Securitas Technology Corporation
8350 Sunlight Drive
Fishers, IN 46037

SECURITY CENTRAL
PO Box 602371
Charlotte, NC 28260-2371

Segra Communications
PO Box 631140
Cincinnati, OH 45263-1140

SESAC INC
PO Box 5246
New York, NY 10008-5246

Sharp Electronics Corporation
100 Paragon Drive
Montvale, NJ 07645

Shiv Shakti Investments LLC
2030 Avalon Parkway, Suite 200
McDonough, GA 30253

Silliker, Inc.
401 N Michigan Ave, Ste 1400
Chicago, IL 60611

SIR RALEIGH ELECTRIC, INC.
26 Apothecary Ct
Garner, NC 27529

Sir Speedy
436 South Center Street
Statesville, NC 28677

Snagajob.com, Inc.
32978 Collections Center Dr.
Chicago, IL 60693-0329

Soggy Dollar Pressure Washing
7937 Country Lakes Rd.
Wilmington, NC 28411

Solid Entertainment Group LLC
c/o David Britt, Registered Agent
615 Lady Street
Columbia, SC 29201

SOMPO International
13146 Ballantyne Corporate Pl, Suite 300
Charlotte, NC 28277

South East Landscape Services
PO Box 444
Bluffton, SC 29910

SOUTH ISLAND PUBLIC SERVICE DISTRICT
PO BOX 5148
Hilton Head Island, SC 29928

Southeastern Electrical Specialists LLC
2855 Pineview Road
Augusta, GA 30909

Southern Lighting Services, Inc.
PO BOX 7599
Ocean Isle Beach, NC 28469

Southern Realty Development Group
c/o Ben D. Arnold, Registered Agent
700 Gervais Street, Suite 175
Columbia, SC 29201

Spartanburg County Tax Collector
PO Box 3060
Spartanburg, SC 29304-3060

Spartanburg Water System
PO BOX 251
Spartanburg, SC 29304

St. John's Fire Equipment Inc.
6000 Philips Highway, Suite 10
Jacksonville, FL 32216

Stanley Convergent Security SolutionNOW9
Dept Ch 10651
Palatine, IL 60055

Staples
500 Staples Drive
Framingham, MA 01702

State Employees Health Plan
1516 Dawson Street
Wilmington, NC 28401

Stewart Jenkins and Clekis Law Firm
Clekis Law Firm
PO Box 1867
Charleston, SC 29402

STORE Master Funding VII, LLC
8377 E. Hartford Dr, Ste 100
Scottsdale, AZ 85255

Stuart A. Sauls
439 Washboard Ln
Ridgeland, SC 29936

Sullivan PTO
1825 Eden Terrace
Rock Hill, SC 29730

Summit Consulting LLC
Bridgefield Casualty Insurance Co
PO Box 988
Lakeland, FL 33802

Superior Services TM LLC
36 Persimmon, St #202
Bluffton, SC 29910

SW CHARLOTTE, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

Swift Curie McGhee & Hiers LLP
1420 Peachtree St NE #800
Atlanta, GA 30309

Swift Fire Protection
2450 Satellite Blvd
Duluth, GA 30096

Synergi Partners Inc.
PO Box 5599
Florence, SC 29501

Sysco Columbia, LLC
PO Box 9224
Columbia, SC 29290-9224

Szabo Associates, Inc.
3355 Lenox Road NE, Suite 945
Atlanta, GA 30326

T. Cooper Hull Photography LLC
4119 Brandie Glen Rd
Charlotte, NC 28269

Take 44 Presents, LLC
3175 Country Rd 108
Building 2, Suite A
Gonzales, TX 78629

Tattoo Projects
704 Morris St
Charlotte, NC 28202

TavernTrak LLC
9540 Garland Road, STE 381-312
Dallas, TX 75218

Team Mechanical LLC
3585 Centre Circle
Fort Mill, SC 29715

Technocom Business Systems Inc.
3330 Monroe Rd
Charlotte, NC 28205

TECO Peoples Gas
PO Box 31318
Tampa, FL 33631-3318

Tersh Enterprise LLC DBA Service Emperor
Service Emperor
8578 Greenhouse Rd
Metter, GA 30439

The 20 LLC
6600 Chase Oaks Blvd Suite 100
Plano, TX 75023

The Insta Copy Shop, Ltd dba ici Printin
4311 South Blvd., Suite D
Charlotte, NC 28209

The Merchants Company, LLC
c/o Craig N. Orr
535 North Fifth Avenue
Post Office 1289
Laurel, MS 39441

The Seat Doctor
c/o Auto Body Technologies, Inc
110 Herndon Springs

Thomas Restaurant Equipment Inc.
1210 Alleghany Street
Charlotte, NC 28208

Threadgill Agency LLC
4145 Travis Street
Suite 300
Dallas, TX 75204

THYSSENKRUPP ELEVATOR CORP
PO BOX 933004
Atlanta, GA 31193

TIDELANDS AC & REFRIGERATION INC
83 RILEY FARMS RD
Ridgeland, SC 29936

Time Warner Cable
7815 Crescent Executive Dr
Charlotte, NC 28217

Tinder Box
4400 Sharon Road
Charlotte, NC 28211

TJS Deemer Dana LLP (Corp)
118 Park of Commerce Dr, Ste 200
Savannah, GA 31405

TK Elevator
PO Box 3796
Carol Stream, IL 60132-3796

Town of Hilton Head Island
One Town Center Court
Hilton Head Island, SC 29928

Trash Gurl
327 Cypress Gardens Road
Moncks Corner, SC 29461

Travelers
Travelers CL Remittance Center
PO Box 660317
Dallas, TX 75266-0317

Triadex Services, LLC
5334 Primrose Lake Cir.
Tampa, FL 33647

TriMark USA
2801 South Valley Parkway, Suite 200
Lewisville, TX 75067

TWC Services Inc.
14036 S. Lakes Dr.
Charlotte, NC 28273

U.S. Small Business Administration
409 3rd St., SW
Washington, DC 20416

UniFi Equipment Finance, Inc.
801 W. Ellsworth Road
Ann Arbor, MI 48108

Unifirst First Aid and Safety
3499 Rider Trail S
St. Louis, MO 63045

United Healthcare
UHS Premium Billing
PO BOX 94017
Palatine, IL 60094-4017

United Healthcare Choice Plus
185 Asylum Street
Hartford, CT 06103-0450

United Healthcare PPO Dental
185 Asylum Street
Hartford, CT 06103-0450

UNITED MILITARY MARKETING, LLC.
2080 NORTHBROOK BLVD
North Charleston, SC 29406

United States Treasury
Internal Revenue Service
PO Box 267, Stop 812
Covington, KY 41019

Up On a Tuesday LLC
16302 Autumn Cove Ln
Huntersville, NC 28078

UPS
55 GLENLAKE PKWY
Atlanta, GA 30328-3474

US Assure Insurance Svs of FL, Inc.
PO Box 935597
Atlanta, GA 31193-5597

Valley Proteins Inc.
PO BOX 643393
Cincinnati, OH 45264

Vaughn T. Hall
220 Drawdebil Rd
Gilbert, SC 29054

Verizon Wireless
PO Box 660108
Dallas, TX 75266-0108

Villa's Lawncare LLC
133 Eastbrook Park Dr.
Aiken, SC 29801

VISTA WINGS, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

Vital Records Control
PO Box 11407
Dept. 5874
Birmingham, AL 35246-5874

Wake County Revenue Department
Prepared Food and Beverage Division
PO Box 2719
Raleigh, NC 27602-2719

Waste Connections of Charlotte
5516 Rozzelles Ferry Rd
Charlotte, NC 28214

We Wash Windows SC LLC
104 Papa Lane West
Columbia, SC 29172

Weavetec - Benchmark
PO Box 579
Blacksburg, SC 29702

Weiss Creative Inc
189 Wind Chime Ct Ste 104
Raleigh, NC 27615-6572

WHALEY FOOD SERVICE
PO Box 615
Lexington, SC 29071-0615

WILD WING OF AIKEN, LLC
470 Fabian Drive
Aiken, SC 29803

WILD WING OF HILTON HEAD LLC
72 Pope Ave
Hilton Head Island, SC 29928

WILD WINGS OF MCDONOUGH, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

William Parrish Plumbing
7900 Brier Creek Parkway
Raleigh, NC 27617

WILMINGTON WINGS LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

Windstream Communication
REGISTERED AGENT SOLUTIONS, INC.
828 LANE ALLEN ROAD, SUITE 219
Lexington, KY 40504

WINGS OVER SPARTANBURG II, LLC
111 W. Main Street
Spartanburg, SC 29306

WINGS OVER SPARTANBURG, LLC
6100 Fairview Road, Suite 1156
Charlotte, NC 28210

Wrightsville Beach Landscaping Inc
PO Box 805
Wrightsville Beach, NC 28480

Xerographic Digital Printing Inc
1948 33rd Street
Orlando, FL 32839

Yelp Inc
350 Mission Street
San Francisco, CA 94105

Yohe Plumbing of Aiken Inc
PO Box 3836
Aiken, SC 29802

York County Treasurer
1070 Heckle Blvd Box 14, Ste 1100
Rock Hill, SC 29732

York Natural Gas
PO Box 11907
Rock Hill, SC 29731-1907

Zenith Insurance Company
4415 Collections Center Drive
PO Box 9055
Van Nuys, CA 91499-4076

Zeta Tua Alpha Foundation, Inc
1036 S Rangeline Rd
Carmel, IN 46032